

TRANSCRIPT OF PROCEEDINGS

ASSASSINATION RECORDS REVIEW BOARD

----- X
In re: :
PRESIDENT JOHN F. KENNEDY :
----- X

CORRECTED TRANSCRIPT

Deposition of DR. JAMES JOSEPH HUMES

~~CONFIDENTIAL~~

Pages 1 thru 242

College Park, Maryland
February 13, 1996

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BEFORE THE
ASSASSINATION RECORDS REVIEW BOARD

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In Re: :
: :
PRESIDENT JOHN F. KENNEDY :
: :
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College Park, Maryland

Tuesday, February 13, 1996

The deposition of DR. JAMES JOSEPH HUMES, called for examination by counsel for the Board in the above-entitled matter, pursuant to notice, at 8601 Adelphi Road, College Park, Maryland, convened at 10:12 a.m., before Robert H. Haines, a notary public in and for the State of Maryland, when were present on behalf of the parties:

APPEARANCES:

JEREMY GUNN, ESQ., General Counsel
Assassination Records Review Board
600 E Street, N.W.
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Washington, D.C. 20530

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DENNIS QUINN

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C O N T E N T S

EXAMINATION BY COUNSEL FOR:
WITNESS ARRB

Dr. James J. Humes

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1 | P R O C E E D I N G S

2 MR. GUNN: We are assembled for the
3 deposition of Dr. James Joseph Humes to be
4 conducted by the Assassination Records Review
5 Board, which is an independent agency of the
6 Federal Government. We are located now in the
7 National Archives Annex in College Park, Maryland.
8 My name is Jeremy Gunn. I am the general counsel
9 of the Review Board.

10 Seated next to me is Douglas Horne, who
11 works with me on medical evidence in the case. The
12 next person seated next to Mr. Horne is Dennis
13 Quinn, who also has worked with medical evidence in
14 this case. The person at the end of the table is
15 Dr. David Marwell, who is the Executive Director of
16 the Assassination Records Review Board. Also in
17 the room is Colonel Tim Wray.

18 During the course of the deposition today,
19 some people from the National Archives will
20 presumably be coming in the room, and I will
21 introduce them at the time.

22 Approximately three years ago, Drs. Humes,

1 J Boswell, and Pierre Finck agreed to be
2 interviewed in depth by the Journal of the American
3 Medical Association regarding their autopsy of
4 President John F. Kennedy. The Assassination
5 Records Review Board applauds the willingness of
6 the doctors to speak out publicly about the autopsy
7 of President Kennedy and to help dispel the
8 appearance of secrecy that has surrounded the
9 assassination and the autopsy. In that same
10 spirit, the Review Board will now be conducting the
11 deposition of Dr. Humes under oath.

12 In the conclusion of the JAMA article that
13 I mentioned, it quoted the distinguished Dallas
14 Medical Examiner Dr. Earl Rose. Incidentally, had
15 the autopsy been performed in Dallas, it would have
16 been performed by Dr. Rose. In the JAMA article,
17 Dr. Rose said, "If we have learned anything in the
18 29 years since the President was shot, it is that
19 silence and concealment breed theories of
20 conspiracy and the only answer is to open up the
21 records, without self-serving rules of secrecy, and
22 let the American people judge for themselves."

1 Dr. Humes, we appreciate your having gone
2 on the record in the JAMA article that I mentioned,
3 and we appreciate your being here today. It's our
4 understanding that you drove here from Florida,
5 which is a long trip, and we appreciate the effort
6 that you've made.

7 At this point, I would like to ask the
8 reporter to swear the witness.

9 Whereupon,

10 DR. JAMES JOSEPH HUMES
11 was called as a witness and, having been first duly
12 sworn, was examined and testified as follows:

13 EXAMINATION BY COUNSEL FOR THE
14 ASSASSINATION RECORDS REVIEW BOARD
15 BY MR. GUNN:

16 Q Dr. Humes, I'd like to show you two
17 documents and ask you whether you have seen them
18 before. I will note for the record that they are
19 designated as MD 100 and MD 101, the MD standing
20 for medical document.

21 A Yes, I've seen them both.

22 Q MD 100 is a cover letter and a notice of

1 subpoena to Dr. Humes. MD 101 is a letter to Dr.
2 Humes rearranging the date and specifying the place
3 of the deposition.

4 Have you seen those two documents before,
5 Dr. Humes?

6 A Yes, I have.

7 Q Is it your understanding that you're
8 appearing here today pursuant to your having
9 received these documents?

10 A That's correct.

11 Q Dr. Humes, in Exhibit 101, I mentioned to
12 you--and I believe also by phone--that you had the
13 right to have an attorney here today if you wish.
14 Was it your understanding that you did have the
15 opportunity to have an attorney?

16 A Yes. I couldn't imagine what I would do
17 with an attorney, but I understood it clearly.

18 Q If you wish, you will be given the
19 opportunity to see a copy of the transcript that is
20 being prepared today. You will be able to review
21 the transcript to see if there are any errors.
22 There will be a tape recording made of the

1 deposition, and there will also be a new document
2 created to record any of the errors that you may
3 have identified in the transcript.

4 A I would welcome that.

5 Q I'm going to attempt to ask clear
6 questions. Whenever I do that, sometimes I succeed
7 and sometimes I don't. If there's any time that
8 I'm asking a question that you don't understand,
9 please ask me to either rephrase it or state it
10 again. You also may wish to have the court
11 reporter read back the same question again, but you
12 shouldn't hesitate if there is anything that is
13 unclear.

14 During the deposition, we're going to be
15 working with a numbered exhibit list which is going
16 to be given to the reporter to be included as part
17 of the record. We are not going to be referring to
18 all documents in the order in which the numbers are
19 designated, but a person would be able to identify
20 the document by making reference to the exhibit
21 list.

22 Dr. Humes, I'd like to ask you to oblige

1 us with one further request. We would appreciate
2 your not disclosing to anyone the content of the
3 discussions that we are having today until the
4 Assassination Records Review Board has been able to
5 conclude its work on the medical aspect of the
6 case. It's my best estimate that that would be
7 completed probably within this calendar year.

on May 1996

8 Is that agreeable to you?

9 A Yes, sure.

10 Q It's our understanding that you have
11 testified on the record three times before
12 government commissions. Is that correct?

13 A Yes, I guess so: the Warren Commission
14 and twice in the Congress.

15 Q Did you have an opportunity to review the
16 transcripts of those statements before they were
17 published?

18 A I'm not sure, to tell you the truth. I
19 don't remember.

20 Q Did you ever have an opportunity to review
21 the statements at all?

22 A It seems to me that in one--well,

1 certainly nothing from the Warren Commission. In
2 one or another of the House, I may have seen my
3 portion of the testimony. But I'm not absolutely
4 certain about that, but I think I did.

5 Q Do you recall whether in your reading the
6 testimony that you just made reference to that you
7 identified any mistakes, transcriptions, or errors
8 in the words that were attributed to you?

9 A I really can't recall. It was a long time
10 ago.

11 Q As I mentioned to you shortly before we
12 went on the record, we will be asking questions to
13 help clarify some of the issues that are in the
14 record related to the assassination and to the
15 autopsy of the President. Certainly at the end of
16 the deposition, and before, if you think that that
17 would be appropriate, you should feel free to
18 explain any area that you think has not been--any
19 questions or explain any statements that you have
20 that you think would help clarify the record.

21 Dr. Humes, did you bring any records with
22 you today pursuant to the subpoena that was marked

1 as Exhibit 100 to this deposition?

2 A Yes, I did.

3 Q Could you tell me briefly what it is that
4 you brought to the deposition?

5 A I brought a videotape of an interview that
6 I granted to a local television station in
7 Jacksonville in 1988 on the 25th anniversary of the
8 assassination. I brought the tape and the cover
9 letter from the producer who sent it to me. I
10 brought a brief CV of my own to maybe assist the
11 committee. I brought a copy of a reprint of the
12 Journal of the American Medical Association article
13 of May 1992, which records the interview that Dr.
14 Boswell and I gave to personnel from the Journal.

15 I brought a letter to me from Congressman
16 Louis Stokes, who was the chairman of the House
17 Select Committee. It's dated in October of 1978,
18 and he's just thanking me for appearing there and
19 trying to help them in their work.

20 I brought a letter from Carl Eardley, an
21 Acting Assistant Attorney General, dated May 1967,
22 prior to my agreeing to appear on a CBS interview

1 to us in our work.

2 I brought a copy of a newspaper clipping
3 describing the demise of Dr. George Burkley, who
4 was the President's physician at that time.

5 I brought two receipts signed by Dr.
6 Burkley. The first is dated November 24th when he
7 acknowledges the receipt of the original and six
8 copies of the autopsy report which we had prepared,
9 one having been retained in the office of the
10 commanding officer of the Naval Medical Center.
11 And then on the 25th of November, I delivered that
12 final copy to Dr. Burkley, and he signed
13 acknowledging the receipt of that.

14 Q With regard to the two receipts that you
15 mentioned, would it be fair to say that those
16 documents are themselves photocopies?

17 A That's correct.

18 Q So neither of those is an original.

19 A Right.

20 Q Did you bring any other documents with you
21 today?

22 A I brought two letters from Dr. Judd

1 Pearson dated in 1967, in July and October, in
2 which he describes the interest of a number of
3 people in the Congress, mentioning specifically
4 Senator Russell, who had served on the Warren
5 Commission, stating that they were concerned about
6 some of the problems the Warren Commission
7 perceived and the various things related to it and
8 wondering if we could get together and discuss what
9 some of those problems were and what action might
10 be taken to avoid them in the future.

11 And in a similar vein, a letter from then
12 District Attorney of Philadelphia, Mr. Arlen
13 Specter, basically on the same point of view, in
14 which Senator Specter described some of the things
15 that he thought had been problems and that steps
16 should be taken to try and avoid those kinds of
17 problems should we have such a future tragic
18 occurrence.

19 Q Now, I understand from a statement that
20 you made prior to the deposition that you have
21 concern that you are worried about release of this
22 particular letter without Senator Specter having

1 program with Mr. Dan Rather, saying that the
2 Justice Department had no objection to my doing
3 that.

4 I brought a list of--a copy of our--Dr.
5 Boswell, Dr. Finck and I--our review of all the
6 various photographs that are present in the
7 Archives that we reviewed on November 1, 1966, the
8 details of various photographs numbered and
9 identified by that.

10 Q If I can ask you one question about that
11 document.

12 A Yes.

13 Q On the document that you brought, are
14 there original handwritten notes in blue ink?

15 A Yes.

16 Q And does the document contain the actual
17 signatures of the three doctors whom you mentioned?

18 A Yes, it does.

19 I brought, for interest, a newspaper
20 recording of the demise of Dr. John Ebersole, who
21 was the radiologist on duty at Bethesda the night
22 the President was killed, and he was very helpful

1 Are there any other kinds of records that
2 you have in your possession, custody, or control
3 that relate to the assassination of President
4 Kennedy?

5 A Well, I have a number of letters from
6 private citizens, who are generically known as
7 "assassination buffs" around the country, who
8 express all kinds of points of view, and I receive
9 them frequently, usually two or three times a
10 month, sometimes two in a week. I never answer any
11 of them. I don't understand what keeps these
12 people going. I did bring one such letter, but I
13 really don't think it's mundane to what you're
14 doing. I guess this will go along for time
15 * immemorial while I'm still this side of the grass.

16 Q Would it be fair to say or to recapitulate
17 what you say that, although you have received these
18 letters from the public, you have not engaged in
19 any correspondence with those people?

20 A Absolutely.

21 Q Dr. Humes, other than with your family,
22 have you discussed the subject matter of the

1 deposition today with any other people?

2 A Oh, I've told people I'm coming, my
3 golfing partners that I'm going to be missing this
4 week and I was coming to give a deposition, and
5 they all expressed dismay. That's all I can say
6 about that. I said nothing about what I--I had no
7 idea what you were going to ask me, so I couldn't
8 very hardly tell them what was going to transpire.

9 So it's no secret that I'm here, if that's
10 what--

11 Q Sure.

12 A I was not instructed to remain silent
13 about this affair, particularly when I understand
14 you're trying to get it all ultimately out in the
15 open.

16 Q Would it be fair to say, then, that you
17 have not spoken with any officials of the United
18 States Government other than the Assassination
19 Records Review Board regarding the subject of the
20 deposition?

21 A Absolutely.

22 Q Dr. Humes, I would like to show you some

1 records, many or all of which you may have seen
2 before, and I would just like to ask you if you can
3 identify them for the record.

4 A Okay.

5 Q Or I will read a description, and you tell
6 me whether that's accurate. The first document is
7 MD 3, which on its face appears to be the autopsy
8 protocol, signed by Drs. Humes, Boswell, and Finck.

9 A Yes, that's what it is.

10 Q I'd like to show you the next document,
11 which is identified as Exhibit No. 2, and ask you
12 if you can recognize what that document is.

13 A Yes, this is my longhand notes from which
14 the previous document was put together. I did this
15 by myself over the weekend after the assassination,
16 and then on Sunday morning, we three met in the
17 office of the commanding officer of the Naval
18 Medical Center, Admiral Galloway, and made certain
19 editorial changes that we mutually agreed were
20 preferable. Somebody had to do the writeup, and
21 since I was the senior person responsible, I did
22 it. And we revised it by mutual consent.

1 Q The next document is marked Exhibit 1.

2 Would you identify that document?

3 A Yes. This is a form which we used in the
4 morgue routinely, more or less, to make certain
5 notations about the findings at the autopsy.
6 There's a place for the weights of certain organs
7 and so forth and sketched diagrams of a human body
8 on which certain notes have been made. These notes
9 were made almost exclusively by Dr. Boswell.

10 Q Would it be fair to say that Exhibit No. 1
11 is the autopsy face sheet for President Kennedy?

12 A This?

13 Q Yes.

14 A No. It's not the face sheet. It's just
15 an aide-memoire that we use routinely. It never
16 appears like that in an autopsy report, no.

17 Q Is there any other name that this document
18 would go by other than face sheet that you're aware
19 of?

20 A I never heard it called a face sheet, to
21 tell you the truth. I never heard it referred to
22 in that way. I can't tell you, no.

1 Q And Exhibit No. 1 is two pages long; is
2 that correct?

3 A This is the second page?

4 Q Yes.

5 A Yes, well, this--the first page that you
6 showed me was a schematic portrayal of the human
7 body and certain other information--was a routine
8 that we used day to day. The second page is not a
9 pre-prepared form. This is a sketch made by, I
10 presume, Dr. Boswell, because I didn't make it--I
11 presume by Dr. Boswell--showing schematically the
12 head injuries to the President.

*The second
"page" is
schematically
in a way, it
was the
back of
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about
which
humerus
like*

13 Q I'd like to show you Exhibit 4, which
14 appears to be the Supplementary Report of Autopsy,
15 No. A63-272, of President John F. Kennedy. Do you
16 recognize that document?

17 A Yes.

18 Q Is that, in fact, a supplementary report--

19 A That's the supplementary report, right.

20 Q And that's your signature at the bottom of
21 that page?

22 A That's correct. I haven't seen it for

1 about 40 years, but outside of that...

2 Q I'd like to show you Exhibit No. 11, which
3 appears to be your testimony before the Warren
4 Commission on Monday, March 16, 1964. Do you
5 recognize that document as being--

6 A Yes, I do. I don't think I ever saw it
7 before, incidentally, but I recognize what it is,
8 certainly.

9 Q The next document is MD 20, which appears
10 to be the transcript of the medical panel meeting
11 in which you were interviewed with Dr. Boswell from
12 the House Select Committee on Assassinations on
13 September 16, 1977. Have you seen that document
14 previously?

15 A No. I have not. I recall that experience
16 with some misgivings as to what people thought they
17 saw or didn't see in photographs and drawings and
18 whatever. It was somewhat confusing. But I never
19 saw the document, no.

20 Q The next document appears to be the
21 testimony that you provided to the House Select
22 Committee on Assassinations. It is marked Exhibit

1 21. Have you seen that document previously?

2 A No. If I have, I totally forgot it. But
3 I doubt very seriously I ever saw it.

4 Q The next document, marked Exhibit 14,
5 appears to be a review of autopsy materials with a
6 handwritten date of 1/26/67. I assume you have
7 seen that document previously.

8 A Yes, I have seen this paper. I don't know
9 if I ever saw that last page.

10 Q The last page is a National Archives
11 reference page.

12 A Yes.

13 Q You would not have--

14 A Yes, I've seen that document.

15 Q And the final document I'd like to show
16 you at this point is an article from the Journal of
17 the American Medical Association on May 27, 1992.
18 I assume that you have seen this.

19 A That's the same article that I brought
20 along today.

21 Q Dr. Humes, for the most part, I am not
22 going to ask questions about your background or

1 education, but there is one question that I had
2 that I did want to ask about, and that is, in the
3 document marked Exhibit 22, on page 2795, it
4 reports that you "performed several autopsies on
5 military personnel killed by gunshot wounds."

6 A Yes.

7 Q Is that statement correct?

8 A That's correct.

9 Q When did--

10 A Usually they're accidents or homicides or
11 whatever.

12 Q When did you conduct the autopsies for
13 gunshot wounds?

14 A Well, ones that stand out in my mind, two
15 were in Tripler Army Hospital in Hawaii. The truth
16 of it, I can't recall, specifically recall where
17 else. In San Diego, we did 800 autopsies a year.
18 It's really kind of hard for me to specifically
19 recall the details of many of those. I never held
20 myself forth as an expert in gunshot wounds. That's
21 why I called Pierre Finck, who was an expert.

22 Q Had you had experience with gunshot wounds

1 prior to 1963?

2 A Yes.

3 Q And those were, as best you recall now, at
4 Tripler Hospital in Hawaii?

5 A Yes.

6 Q And in San Diego?

7 A Possibly San Diego.

8 Q Dr. Humes, did you at any time receive any
9 orders instructing you not to talk about the
10 autopsy or restricting what you could say about the
11 autopsy?

12 A Yes.

13 Q Could you tell me about the orders that
14 you received? How many were there, I guess to
15 begin with?

16 A Oh, I don't know. They were all verbal.
17 I never had a written order of any kind in this
18 regard. When I was summoned to the Naval Medical
19 Center--and, truthfully, I didn't know why I was
20 being summoned there on the evening of the
21 President's death--I met with the Surgeon General
22 of the Navy, Admiral Kenny, and the commanding

1 officer of the Naval Medical Center, Admiral
2 Galloway. And Admiral Kenny basically gave me my
3 marching orders, informing me that the President's
4 body was being brought there, that I was to be
5 responsible for determining the cause of his death,
6 that I should keep the number of people that were
7 going to work with me or assist me to the minimum
8 that I might require. He was giving no restriction
9 as to who these people might be other than to--you
10 know, let's not have the whole country in the
11 morgue; keep it to as many people as you think you
12 really need to make a reasonable examination.

13 And then I guess it was more like a tacit
14 understanding that I was not going to have public
15 disclosure of this. I never received any such
16 written order from anybody that I can recall. In
17 fact, I know I didn't. It didn't seem to me to be
18 an appropriate thing to discuss in the public
19 anyway, period.

20 Q Did any officer instruct you orally not to
21 say anything about the autopsy?

22 A I really can't recall such, no. Just

1 common sense, I think, pertained more than anything
2 else.

3 Q If Dr. Finck were on the record as saying
4 that he received instructions from the Surgeon
5 General not to say anything about the autopsy,
6 would you have any reason to question the accuracy
7 of such an observation?

8 A Well, certainly the Navy Surgeon General
9 never told him that, unless it happened after the
10 autopsy, you know, sometime. I have no knowledge
11 of that. Pierre was working in a totally different
12 institution from me, and I can't say whether--was
13 he talking about the Army Surgeon General or the
14 Navy Surgeon General?

15 Q Navy Surgeon General.

16 A I doubt that very seriously. I don't
17 think he even met the Navy Surgeon General that
18 night. I don't know. I mean, I can't account for
19 all of Pierre's movements or people he talked to.
20 I have no way of knowing that.

21 Q Do you know of any orders having been
22 issued to anyone who participated in the autopsy

1 regarding discussion of the autopsy?

2 A Not really.

3 Q When you say not really, does that mean
4 not at all, or could there have been some instance
5 that you're thinking of?

6 A Yes, there could be, and I'd hate to talk
7 about people who are deceased, you know. Admiral
8 Burkley had certain personal concerns about just
9 one aspect of the autopsy, and I understood his
10 concerns, and I abided by them. They had nothing
11 to do with the assassination of the President.

12 Zero.

13 Q Was the concern about the President's
14 adrenals?

15 A Yes.

16 Q Other than with respect to the President's
17 adrenals, was there any other concern that you
18 heard expressed by Admiral Burkley at any time
19 regarding the autopsy?

20 A Absolutely not.

21 Q Did you ever tell any person that you
22 would not speak about the autopsy? For example,

1 did you promise--

2 A That's a rather broad question. I don't--
3 I can't recall any such.

4 Q For example, did you tell Admiral Burkley,
5 even if he didn't give an order directly or
6 indirectly--

7 A No, no. We had no discussion about it at
8 all. He had more things to worry about than that.

9 Q Is there any promise, agreement, or
10 understanding that would affect your ability to
11 talk freely and fully about the autopsy today?

12 A In this milieu, no. The one disturbing
13 thing that I would not like to see widely
14 publicized any more today than I would in 1963 were
15 the photographs that we made, which were very, very
16 repulsive. It caused me problems because we didn't
17 have the photographs at the Warren Commission. We
18 didn't have the X-rays, even. And that did cause
19 us problems. But I agreed with the reason for not
20 doing it, because as you already know, I'm sure,
21 some of those photographs somehow or other have
22 gotten into the hands of people that I don't think

1 should have ever had them in the first place.

2 That's my only reservation about any
3 aspect of it.

4 Q Were you ever told, directly or
5 indirectly, that the Kennedy family did not want
6 people to speak about the autopsy?

7 A No, other than the photographs. I was
8 told that the members of the Kennedy family
9 objected to the photographs being made. I had no--
10 personally, I had no personal contact with any
11 member of the Kennedy family, either that night or
12 before or since.

13 Q In your testimony to the House Select
14 Committee on Assassinations--and I can show you a
15 document, if you wish--you were quoted as having
16 said, "I have strong personal reasons and certain
17 other obligations that suggest to me that it might
18 not be preferable." And that was referring to the
19 adrenal glands.

20 When you said "certain other obligations,"
21 could you explain to me what you meant by that?

22 A My conversation with Admiral Burkley,

1 strictly. And the nature of that conversation I
2 don't think I should discuss with you people.

3 Q Just so it's clear here, that discussion
4 pertains solely to the question of the adrenal
5 glands?

6 A Precisely.

7 Q As you no doubt know, there have been
8 allegations made about who was in control of the
9 autopsy. I'd like to ask some questions about
10 that. As best I understand, you're quite firm on
11 the record that you were the person in charge of
12 the autopsy; is that correct?

13 A Regrettably, yes. There's no doubt about
14 it, as a matter of fact, unfortunately.

15 Q One of the problems that exists in the
16 record is statements from other people who were
17 participating in the autopsy who said that others
18 were in charge or others were giving orders. So
19 I'd like to find out what your response would be to
20 the quotations that I'm going to show you--

21 A Go right ahead.

22 Q The first one I'd like to make reference

1 to is in Exhibit 26, and I can show you this, if
2 you wish. This is in the report from the House
3 Select Committee on Assassinations, dated August
4 17, 1977, by Andy Purdy, where he conducted an
5 interview with Dr. Boswell. And I'm now going to
6 quote from Mr. Purdy's words: "He"--and that's
7 referring to Dr. Boswell--"indicated that Dr.
8 Burkley was basically supervising everything that
9 went on in the autopsy room and that the commanding
10 officer was also responding to Burkley's wishes."
11 That's on page 2 of--

12 A Well, I think that's a misinterpretation
13 by J of what was going on. You see, Mrs. Kennedy
14 and the Attorney General were upstairs in the
15 hospital. She had stated she wasn't going to leave
16 there until she could accompany the President's
17 body to the White House. And Admiral Burkley was
18 anxious that that period be shortened to as much--
19 you know, as much as possible. And he did from
20 time to time suggest--but as far as telling me what
21 to do or how to do it, absolutely, irrevocably no.
22 He's not a pathologist, to start with. He wouldn't

1 presume to do such a thing. You'll have to talk to
2 J about this.

3 George Burkley, his main concern was let's
4 get it over with as fast as we could, and we had
5 big problems, and we couldn't get it over with as
6 fast as he would have liked it to have been
7 completed. That's my reaction to that.

8 Q Let me show you a second document, Exhibit
9 No. 19.

10 A Part of the reason why we avoided talking
11 about this thing, because every time you say
12 something, somebody misinterprets what you say.

13 Q Document 19 is a memo written by Andy
14 Purdy, who was on the House Select Committee staff,
15 and I'd like to show you from page 13 of the
16 document where it's referring to statements made by
17 Mr. Stringer. First, do you know who Mr. Stringer--

18 A Yes, John Stringer was the chief of our
19 Medical Photography Department, a very excellent
20 performer. He had won several awards for various
21 photographs in competitions and so forth, and he
22 was responsible, under my direction, for taking the

1 pictures.

2 Q Could you look at the second full
3 paragraph of that page 13? And I'll ask you one
4 specific question from it.

5 A Go ahead.

6 Q The last sentence of that paragraph says,
7 "He"--this is referring to Mr. Stringer--"believed
8 the President's physician (Admiral Burkley) was at
9 the center of these discussions," the discussions
10 relating to not doing the complete autopsy.

11 A That's a misinterpretation, too. I don't
12 know where he got that idea.

13 Q Were there discussions with Admiral
14 Burkley about doing something less than a complete
15 autopsy?

16 A With regard to the adrenal glands, yes.

17 Q With respect to anything else?

18 A Absolutely not.

19 Q For example, with respect to the neck, did
20 Admiral Burkley say anything about--
21

A No.

22 Q --the full autopsy?

1 A No. Admiral Burkley's role has really
2 been greatly accentuated here, as far as I can see.
3 I'd like to blame him for everything if anything's
4 wrong, but I can't.

5 Part of my problem is I've never seen most
6 of these documents. It's hard for me to discuss
7 too much about them when I've never seen them.

8 Q I'd like to show you a document marked
9 Exhibit 67, and I caution you about the staple.
10 Don't puncture your finger. Document 67 is an oral
11 interview with Admiral George Burkley conducted on
12 October 17, 1967.

13 A Yes.

14 Q And I'd like to draw your attention to the
15 * bottom of page 16 and the top of page 17, if you
16 could read that to yourself. You can read any
17 other portion you wish, but that's where I will be
18 asking you the question.

19 I'll just state for the record this is an
20 oral history from the John F. Kennedy Library of
21 George G. Burkley conducted by William McHugh.

22 A Well, his memory is a little foggy here.

1 I ordered every X-ray that was taken. He didn't
2 have a thing to do with the ordering of X-rays. I
3 X-rayed the President's body from head to toe for
4 the simple reason that missiles do very funny
5 things occasionally in the human body. And George
6 Burkley had absolutely nothing to do with it,
7 period.

8 Q Would you say that--

9 A He says he supervised the autopsy. He was
10 in the room. As far as supervising the autopsy, he
11 didn't. Nobody supervised. I'm, unfortunately,
12 responsible for it. Maybe he thought he was
13 supervising it. If that made him feel better,
14 that's okay with me, too. But I could not have put
15 up with that. You know, just--it was not in my
16 nature to be that retiring. I'm afraid I haven't
17 changed a great deal.

18 I never saw this document before, of
19 course.

20 Q Did you ever receive any orders or
21 instructions about limiting the scope of the
22 examination of the brain?

1 A Never.

2 Q Did you receive any instructions or orders
3 regarding limitations on dissection of the organs
4 of the neck?

5 A No.

6 Q During the course of the autopsy--

7 A Let me interrupt there. May I?

8 Q Sure.

9 A My problem is, very simply stated, we had
10 an entrance wound high in the posterior back above
11 the scapula. We didn't know where the exit wound
12 was at that point. I'd be the first one to admit
13 it. We knew in general in the past that we should
14 have been more prescient than we were, I must
15 confess, because when we removed the breast plate
16 and examined the thoracic cavity, we saw a
17 contusion on the upper lobe of the lung. There was
18 no defect in the pleura anyplace. So it's obvious
19 that the missile had gone over that top of the
20 lung.

21 Of course, the more I thought about it,
22 the more I realized it had to go out from the neck.

1 It was the only place it could go, after it was not
2 found anywhere in the X-rays. So early the next
3 morning, I called Parkland Hospital and talked with
4 Malcolm Perry, I guess it was. And he said, Oh,
5 yeah, there was a wound right in the middle of the
6 neck by the tie, and we used that for the
7 tracheotomy. Well, they obliterated, literally
8 obliterated--when we went back to the photographs,
9 we thought we might have seen some indication of
10 the edge of that wound in the gaping skin where
11 the--but it wouldn't make a great deal of sense to
12 go slashing open the neck. What would we learn?
13 Nothing, you know. So I didn't--I don't know if
14 anybody said don't do this or don't do that. I
15 wouldn't have done it no matter what anybody said.
16 That was not important. I mean, that's--

17 Q Do you know what the standard autopsy
18 protocol is for gunshot wounds and autopsy of the
19 neck?

20 A Well, no. I haven't seen that in--what
21 you say, standard, I mean, many times if you have a
22 track of a missile, it's helpful to take a long

1 probe and put it in the position. It can tell you
2 a lot of things. If you know where the point of
3 entrance and the point of exit are, it's duck soup.
4 But for me to start probing around in this man's
5 neck, all I would make was false passages. There
6 wouldn't be any track that I could put a probe
7 through or anything of that nature. It just
8 doesn't work that way.

9 Q Was any probe used at all to track the
10 path--

11 A I don't recall that there was. There
12 might have been some abortive efforts superficially
13 in the back of the neck, but no.

14 And if there's a standard protocol, I
15 don't know where you'd find it, to tell you the
16 truth.

17 Q Dr. Humes, did you request at any time
18 during the autopsy to see the clothing which
19 President Kennedy had been wearing at the time of
20 the assassination?

21 A No, I didn't. I should have, probably,
22 but didn't.

1 Q Do you know where the clothing was during
2 the--

3 A No, I don't. I did see the clothing
4 ultimately in the Archives, but I didn't know where
5 it was.

6 Q Other than from Dr. Burkley, did you
7 receive or understand any requests for the autopsy
8 to be expedited?

9 A No.

10 Q So Burkley was the only source of--

11 A Right.

12 Q Other than for the adrenals and for the
13 autopsy photographs, was it ever conveyed to you
14 any requests or preferences of the Kennedy family
15 for anything to do with the autopsy?

16 A No, not at all--well, with one exception:
17 with the brain. And I don't have the date, and I
18 don't--if I had a receipt, which I wish I had, I
19 don't have now. Sometime in the next several days--
20 --and I can't tell you when it was--George Burkley
21 came to see me and said that Robert Kennedy wished
22 to inter the President's brain with the body. And

1 that was the desire of the family, and Robert
2 Kennedy was the spokesperson. So he asked me would
3 I give him the brain, which I promptly handed it to
4 him in a pail. And then the mystery really begins,
5 because what happened after that, I don't know.

6 Q Did you give Dr. Burkley the brain prior
7 to the time President Kennedy was interred on
8 November--

9 A No, no, no, no, no. No. It was
10 afterwards.

11 Q Approximately when?

12 A I couldn't tell you. I can't remember. I
13 would say it was within 10 days, probably. But I
14 just don't know. I can't remember. It seemed like
15 a logical request, as far as I was concerned. You
16 know, I didn't have any mystery as to what happened
17 to the man.

18 Q There are statements on record, which I
19 can show to you, if you wish, that suggest that Dr.
20 Finck believed that there were restrictions on the
21 scope of the autopsy with respect to the neck.
22 Does that help refresh any recollection--

1 as Exhibit 7 and ask you if this is the autopsy
2 manual you were referring to.

3 I'll state for the record that Exhibit 7
4 appears on its face to be an autopsy manual
5 produced by the Department of the Army Technical--
6 excuse me, Departments of the Army, the Navy, and
7 the Air Force, dated July 1960.

8 A I never saw this specific--I never saw
9 this specific document ever. I presume it was
10 circulated primarily in Army circles. I don't
11 know. If it was in our department, I never saw it.

12 Q When you received training--let me try
13 that question again. Did you take any courses in
14 forensic pathology prior to the time of the
15 autopsy?

16 A The only specific course I took was a one-
17 week course at the Armed Forces Institute of
18 Pathology in November of 1953. I remember it
19 because it was held at the AFIP in the old building
20 downtown at 7th and Independence where the
21 Hirshhorn Museum is now. And I remember it vividly
22 because the course was very well done. A number of

1 A No, not with--I don't know where Pierre
2 got that information, but he--as far as I'm
3 concerned, I don't understand that.

4 Pierre had a terrible time, incidentally,
5 getting into the place because the Marines were not
6 about to let this Army guy come in that night.

7 Q Did anyone ever suggest to you, directly
8 or indirectly, that there should not be a
9 sectioning of the brain?

10 A No. Absolutely not.

11 Q Dr. Humes, are you aware of any rules,
12 regulations, or manuals that would have governed
13 performance of military autopsies as of 1963?

14 A Not really. We had a manual, an autopsy
15 manual that was a guide that we used to train
16 residents. It wasn't something we frequently
17 referred to, to tell you the truth, because you
18 changed your technique and what you did depending
19 on the nature of the problem.

20 Q Let me show you--

21 A At least I did.

22 O Let me show you a document that's marked

1 as Exhibit 7 and ask you if this is the autopsy
2 manual you were referring to.

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4 appears on its face to be an autopsy manual
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17 week course at the Armed Forces Institute of
18 Pathology in November of 1953. I remember it
19 because it was held at the AFIP in the old building
20 downtown at 7th and Independence where the
21 Hirshhorn Museum is now. And I remember it vividly
22 because the course was very well done. A number of

1 nationwide experts were there. Ford from Boston
2 was the medical examiner of the State of
3 Massachusetts, and several others I could conjure
4 up if it was anybody's interest. But the reason I
5 remember it so vividly, it was over at noon on
6 Friday. I was stationed at the Philadelphia Naval
7 Hospital, and I was going to drive back to
8 Philadelphia. But I decided to go by Bethesda and
9 visit some of my friends, some of my former
10 trainees and one thing or another. So I went out
11 there, and we got embroiled in conversation, and
12 around 5 o'clock, somebody said, Jim, you'd better
13 get started because it's snowing. November the
14 10th, 1953.

15 So I look out the window, and there's
16 about a foot of snow. I had just come back from
17 Panama, and somebody in Panama had advised you
18 disconnect the heater in your car while you're in
19 Panama. I can't recall what the rationale behind
20 that was. But I had--it was now fall, and I had
21 not reconnected the heater. So I start up old
22 Route 1 to Philadelphia in this car. It was a

1 Plymouth coupe. And, of course, the snow is
2 immediately blocking my vision. I had to stop
3 about every five miles or ten miles between
4 Washington and Baltimore to get the snow off the
5 windshield. By the time I got to Baltimore, the
6 city was deserted. There was snow all over the
7 place, and nobody was moving. I pulled up in front
8 of the Lord Baltimore Hotel. I said, Do you have
9 any rooms? The guy said, We got rooms like they're
10 going out of style. So I stayed--I said, well, I'm
11 going to stay right here. I called my wife in
12 Philadelphia. She said, Hey, if you want to spend
13 an extra night down there, don't give me this snow
14 business. I said, Ann, it's snowing like mad.

15 So, anyhow, she was joshing with me, but
16 it was not snowing in Wilmington or Philadelphia or
17 any place. So I started out the next morning, and
18 you never saw such a trip, because I spent--I heard
19 the whole Notre Dame-Penn football game in one spot
20 in Havre de Grace. Never moved. By the time I got
21 to Wilmington, there was no snow.

22 So if you ask me do I remember that

1 course, I'll never forget it. It was a good
2 course, too, by the way.

3 Q Did they have any kinds of written
4 manuals, documentation, regulations that you used
5 for reference or for instruction in that course?

6 A Not really. There were some handouts that
7 were provided by--the AFIP runs a number of
8 courses. I was involved in them later on myself.
9 And the instructor would provide whatever he
10 thought would be helpful to the people taking the
11 course. I don't recall. There was no particular--
12 for instance, that manual might have been good to
13 have, but it was not a part of the documents of the
14 course.

15 Q Did the Naval Medical Hospital have any
16 rules or regulations at the time that you were
17 there that would govern conduct of autopsies?

18 A Well, I was responsible for them if there
19 were, and I can't recall that there were, you know.
20 I've trained young doctors to do autopsies all my
21 life, and I didn't often use manuals.

22 Q Were there any manuals or references at

1 all that you used during the actual course of the
2 autopsy of President Kennedy?

3 A No. No.

4 Q Dr. Humes, I'd like to go through the
5 events as they occurred, as best you can recollect
6 them, on November 26th, starting from--

7 A 26th?

8 Q Excuse me. November 22nd, starting in the
9 afternoon. The first question I'd have for you
10 would be whether you heard from anyone prior to the
11 time the autopsy began about the nature of the
12 wounds that President Kennedy had suffered.

13 A Not at all.

14 Q Are you familiar with the name of Robert
15 Livingston, Dr. Robert Livingston?

16 A Is this him? No, that's Harry
17 Livingstone. No, I'm not.

18 Q I'd like to show you a transcript of some
19 testimony that he offered in the case of Crenshaw
20 v. Sutherland?

21 A May I ask who is Dr. Livingston?

22 Q Yes.

1 A Not the guy in the jungle.

2 Q According to "Who's Who in America,"

3 Robert Livingston is a neuroscientist who received
4 his undergraduate and medical degrees from Stanford
5 University, and he was a resident at Stanford
6 Hospital in San Francisco. In 1963, he was the
7 chief of the Neurobiology Lab at the National
8 Institute of Mental Health.

9 A Okay.

10 Q Does that help refresh your recollection
11 of who Dr. Livingston is?

12 A I don't know him from Adam, personally. I
13 never heard of him before this minute, but I don't
14 doubt his qualifications or whatever.

15 Q I'd like you to take a moment, if you
16 would, and read the deposition from page 23, line
17 1, to page 26, line 16.

18 You should also feel free to read any
19 other part of the deposition that you'd like.

20 A Now, where?

21 Q Page 23, line 1. This is in microscript.

22 A Page 22--okay. I see it now. Okay.

1 [Pause.]

2 BY MR. GUNN:

3 Q For the record, the exhibit number is No.
4 24.

5 A Well, this is ridiculous. I was at home
6 at this time. He never talked to me, period.
7 Absolutely never did talk to me. I don't need to
8 read any further, to tell you the truth. I mean, I
9 don't know what he's talking about. I was at home
10 helping my wife prepare for a social event that
11 night, and our first knowledge of the death of the
12 President was when our children came home from
13 school on the school bus, came in running, yelling,
14 all screaming, of course, "The President was shot."
15 And I couldn't even remember where the President
16 was, to tell you the truth, at that time. But I
17 never talked to this person.

18 Q Could you complete through page 26, line
19 16, please?

20 A I get confused. It stops and goes over to
21 another...

22 Q 24, 25, 26.

1 A It doesn't follow, sir. It doesn't
2 follow.

3 Q 23.

4 A I see.

5 Q 24.

6 A Well, this doesn't follow this. It makes
7 no sense. It's a nonsense. I don't mean it
8 frivolously.

9 Q At this point it says--there is an
10 objection, calls for speculation, then there's some
11 colloquy, and it's back to--

12 A What? All I see is the word
13 "speculation"--oh, somebody objects--

14 Q "Objection, calls for speculation."

15 A Oh, okay.

16 Q The passage between the two pages.

17 A Okay. I didn't understand that.

18 This is fantasy. Pure fantasy. I don't
19 know where this guy was or where he's coming from.
20 He was concerned about the autopsy, he called me
21 and talked to me about it? He never talked to me.
22 I mean, I'll read it, but I don't know what good

1 it's going to do you.

2 Never happened. That's all I can tell
3 you. If I did, I mean, I developed amnesia of some
4 kind or other. But a long conversation like this
5 at 4 o'clock in the afternoon, absolutely,
6 categorically did not occur.

7 Q Just so the record is clear here, you are
8 saying that--would it be fair to say that you're
9 saying that Dr. Livingston never called you on the
10 22nd--

11 A To my recollection, he never called me.
12 The only person, outside of the people right there
13 on the scene, I spoke to was Bruce Smith. Bruce
14 Smith, a very dear friend, close friend of mine,
15 was the Deputy Director-Navy at the AFIP at that
16 time. He called and offered the services of the
17 AFIP, anybody I needed, which was very logical. I
18 had been stationed at the AFIP. You know, it was
19 home to me. It was a very cordial conversation.
20 "Bruce," I said, "Thanks a lot. Let me see what
21 the problem is, and if I need any help, I'll call
22 you back." When I saw what the problem was, I

1 needed a ballistics person. And I called Bruce
2 back. I said, "Who do you have that's in
3 ballistics?" He said, well, Colonel Finck just got
4 back from Panama, where he'd been unscrambling some
5 who-shot-whom between the Americans and the
6 Panamanians, one of the typical--which was familiar
7 to me because I served for a couple years in Panama
8 during a revolution. So I was very familiar with
9 that. I said, "Well, that sounds great."

10 I welcomed the assistance of Dr. Finck.
11 That is absolutely the only person that I spoke to
12 outside of that building that day. Now, whether he
13 talked to somebody else, I can't--it could be. He
14 could have talked to J or he could have talked to
15 any number of people in our department. We had a
16 big department, you know, but I did not speak with
17 him.

18 Q When on November 22nd is the first time
19 that you came into contact with officials from
20 either the FBI or the Secret Service?

21 A Well, contact, I never really had any
22 dialogue with any of them. Some of them were

1 present in the morgue when the President's body was
2 brought there. I was not introduced to any of
3 them. I didn't need to know any of them. I had to
4 occasionally tell them to keep their conversation
5 down. There was a lot of conversation going on.
6 But I never personally was--can I recall, being
7 specifically introduced to any of them, which I
8 didn't need to be introduced to them, because I
9 knew who they were and they...

10 Q Prior to the arrival of President
11 Kennedy's body, did you see any Secret Service or
12 FBI officials?

13 A No. I had one interesting encounter in
14 that regard. When I found out what the problem
15 was, I went downstairs and got into a scrub suit
16 which I was going to wear to conduct the autopsy.
17 And it was a brand-new morgue. We had just moved
18 into it a couple of months before. And it had a
19 loading dock outside, and that's where they were
20 going to bring the President's body. So I walked
21 outside to see what was going on. A lot of people-
22 -oh, I saw a guy with a speed graphic camera in the

1 building and didn't feel like running after him
2 myself. So I went out to this loading dock, and
3 several people were milling around. And I said,
4 "Who's in charge here?" And some general said, "I
5 am." Well, it turns out he was in charge of the
6 military district of Washington. That was his
7 role. And I said, "General, sorry to bother you,
8 but there's some clown in there running around with
9 a speed graphic camera." Well, he dispatched
10 somebody to corral this guy.

11 That's the only other person that I had
12 any conversation with at all. He responded very
13 quickly when I asked who was in charge. He left no
14 doubt in my mind. But he was in charge of the
15 loading dock. He was not in charge of anything
16 else. I never saw him again in my life.

17 Q When is the first time you had a
18 conversation with anyone outside of people in the
19 autopsy room regarding the nature of the
20 President's wounds?

21 A The next morning when I called Malcolm
22 Perry.

1 Q Approximately--

2 A I'm pretty sure that's who I spoke to. I
3 know it is.

4 Q Approximately what time did you speak to
5 Dr. Perry?

6 A I think 8 or 9 o'clock on Saturday
7 morning.

8 Q Were you aware of any telephone calls
9 being made from the autopsy room during the time of
10 the autopsy?

11 A Well, you see, that's possible. Certainly
12 not by me, but we had a large defect in the side
13 of--in the right side of the President's skull, and
14 there was dialogue back and forth between somebody--
15 -I don't know whether the FBI or Secret Service--
16 that fragments of bone had been picked up on the
17 street. And there was conversation back and forth
18 between--I guess they were Secret Service people.
19 I had no idea, to tell you the truth. And they
20 were going to be sent to us, which was fine because
21 we needed to close the defect if we could. It
22 didn't turn out to be enough to totally close the

1 defect. We did other things to accomplish that.
2 But your specific question, if these phone
3 conversations were going on, I was not directing
4 them, I was not involved in them, and really it
5 wasn't my problem.

6 Q Was there a telephone in the autopsy room?

7 A Yes.

8 Q Do you recall whether anyone was stationed
9 at the telephone during the course--

10 A No, no. If there was, I didn't have
11 anything to do with it.

12 Q Did you make any attempts to call anyone
13 in Dallas prior to the completion of the autopsy?

14 A No.

15 Q Were you aware of any other kinds of
16 communications, in addition to telephone calls,
17 between Bethesda Hospital and Dallas regarding
18 wounds of the body?

19 A No.

20 Q In addition to the call that you had with
21 Dr. Perry, did you speak with any other person who
22 had been in Dallas on the day of the assassination

1 regarding the nature of the President's wounds?

2 A Contemporaneously at that time?

3 Q Thank you. Let me try the question again.

4 Prior to the time that you had completed the
5 autopsy protocol, did you speak with any other
6 doctor--

7 A No.

8 Q --or law enforcement official about the
9 nature of the wounds on President Kennedy's body?

10 A I did not.

11 Q Dr. Perry is the only one, then, prior to
12 the completion--

13 A Right.

14 Q --of the autopsy protocol?

15 A Yes.

16 Q Did you see any written materials prior to
17 the time that you completed the autopsy protocol
18 that discussed or described events in Dallas?

19 A No.

20 Q In the autopsy protocol, there is
21 reference to information that happened in Dallas.
22 Do you recall how you came to have that

1 information?

2 A I'd have to know--

3 Q I'll show you the autopsy protocol.

4 A Yes. I can't recall.

5 Q Just start with the first two paragraphs
6 of the autopsy protocol.

7 MR. GUNN: Dr. Humes is now examining
8 Exhibit 3.

9 [Pause.]

10 THE WITNESS: Yes, this makes reference to
11 the local newspapers, which is the source, plus I
12 may have had the television on sometime on
13 Saturday. I'm not sure. I was busy doing a lot of
14 things. I can't tell you for sure. I had no
15 personal knowledge. I had to get it secondhand,
16 whatever it was. It was not my job. It was not my
17 responsibility in the first place.

18 BY MR. GUNN:

19 Q At the beginning of the second paragraph,
20 it makes reference to the President fell forward.
21 Do you recall now where you obtained that
22 information? Again, the beginning of the first

1 paragraph--the first sentence of the second
2 paragraph on page 2?

3 A I presume from this Washington Post
4 article. I'd have to look at it and see. I had no
5 other source of information that I can recall.

6 Q So, for example, did an FBI or Secret
7 Service agent tell you that--

8 A No, absolutely. I had no dialogue with
9 them at all. Zero. Maybe it would have been
10 helpful. It may have been harmful. I have no
11 idea. But I did not have dialogue with those
12 people.

13 Q Could you describe in a general way what
14 the autopsy room looked like? You mentioned a few
15 minutes ago that it was new. Could you just
16 describe the room?

17 A Well, it's about the size of the room in
18 which we're seated, which looks to me like it's 30
19 by 25 or something of that nature. We had a
20 permanently fixed autopsy table in the center of
21 the room. We had a viewing stand, a two-place
22 viewing stand, along one wall. I think it had two

1 steps. It would accommodate maybe 20 or 30 people,
2 because we used to have conferences in there.
3 Routinely, at the end of a week, we would retain
4 the organs from the autopsies of the week. In
5 fact, not only did we review them there, but there
6 was a closed-circuit television. They went to
7 Andrews Air Force Base, NIH, and it was a closed-
8 circuit instruction program. That platform, a two-
9 step platform, was for observers.

10 And in an adjacent area, we had a
11 refrigerated storage place with either four or six-
12 -I forget the number--places for retention of
13 bodies. And we had a shower and restroom adjacent.

14 Q Was there any kind of gallery in the room
15 other than the two steps that you--

16 A That's what I'm speaking of. It might
17 have three steps. I couldn't--you know, I don't
18 recall how many steps it had. We used to get a
19 fairly decent number of people. Maybe it had three
20 steps.

21 Q Was there any closed-circuit broadcasting-

22 A No.

1 Q --during the night of the autopsy?

2 A No, absolutely not. I wish there was,
3 retrospectively.

4 Q Had you ever performed an autopsy in that
5 room before?

6 A Yes. But let me correct that to some
7 extent. The residents did most of the autopsies,
8 and we rotated the supervision of that activity.
9 It varies. That's the way the residents learned
10 their trade, you know. But, yes, we had--I don't
11 know how many autopsies we've had in that room. It
12 would be easy to find out from the record, of
13 course.

14 Q Approximately how many people were in the
15 autopsy room at the time President Kennedy was--

16 A Geez, that's a good question. That's one
17 of my--I should have thrown them all out. That was
18 one of my biggest problems.

19 There were, I guess--there was an Air
20 Force aide, the Naval aide, an Army aide to the
21 President. They were the most shook-up people you
22 ever saw in your life. And I guess it was around

1 15 people there off and on, maybe 20.

2 Q During the autopsy, was the room quiet and
3 hushed or noisy and bustling? How would you
4 describe the scene?

5 A It varied. We were there for a long time.
6 We were there from about 6:00 or 6:30 in the
7 evening until 5 o'clock the next morning. It was
8 very hushed around 5 o'clock in the morning. But
9 in the early evening, it was--I mean, we had X-ray
10 technicians coming in and photographers and
11 photographers' assistants there, the kind of thing
12 that you would expect under any circumstances, plus
13 these other people, the Secret Service and the FBI,
14 who wouldn't normally be present. But I had to
15 concentrate on what I was doing. I mean, I really
16 couldn't get too worried about these other people,
17 as long as they didn't get in my way, which they
18 didn't.

19 Q In the JAMA article, if they quoted you
20 correctly, you said that the scene in the autopsy
21 room was somewhat like trying to do delicate
22 neurosurgery in a three-ring circus.

1 A At times it was. Not always, but at times
2 when there was a lot of people around. You had to
3 stage stuff. I mean, you couldn't be taking X-rays
4 of the whole body and photographs simultaneously.
5 You know, somebody had to decide who was going to
6 do what when, and I had to do that. George Burkley
7 sure as hell didn't, you know.

8 Q Did anyone make suggestions to you other
9 than Drs. Boswell and Finck, regarding any
10 procedures--

11 A No.

12 Q --during the autopsy?

13 A No.

14 Q None whatsoever?

15 A None. I don't know who it would have been
16 or who would have the...

17 Q Was your commanding officer there?

18 A I had a separate commanding officer, and
19 he was there, it seems to me, part of the time.
20 John Stover was his name. Everybody called him
21 Smoky Stover. At that time, we had a separate
22 command called the Naval Medical School. The Naval

1 Hospital did not have any laboratories. The Naval
2 Medical School had laboratories, and we provided
3 the laboratory service to the hospital. So the guy
4 that was really my commanding officer by rules and
5 regulations was John Stover. But he had--we had a
6 very cordial, pleasant relationship, but he never
7 commanded me to do anything in my life, period. He
8 was off in a different area. We conducted training
9 courses for technologists and technicians and
10 occupational thera--all kind of training courses,
11 and that was his main role, to run the training
12 aspects of the, quote-unquote, medical school.

13 At one time, when my uncle was a Navy
14 doctor, every new doctor coming into the Navy first
15 was assigned to this Naval Medical School for, I
16 think, six or nine months, and they taught some
17 tropical medicine and they taught shipboard
18 sanitation--you know, the kind of things that you'd
19 need to know in the Navy. But if Smoky was there--
20 and I think he was for part of the time--we had no
21 dialogue at all. He would never have presumed to
22 tell me anything, I don't believe. He was a

1 general practitioner, is what he was. He was a
2 field--he spent a lot of time in the Marine Corps.
3 He was a field medical officer, and a very good
4 one, very much respected.

5 Q Who was Captain Stover's commanding
6 officer?

7 A Admiral Galloway.

8 Q Was he present at the autopsy?

9 A I don't think so. I don't think Cal came
10 down there at all. I mean, I can't swear that he
11 was or wasn't there. But if he was, he played no
12 role in it whatever.

13 Really, other than more than look in the
14 room, I don't think Admiral Galloway was there at
15 all.

16 Q Was the Surgeon General of the Navy
17 present--

18 A No.

19 Q --during the autopsy? That's Rear Admiral
20 Kenny?

21 A Kenny.

22 Q And he was not present at all in the

1 autopsy room?

2 A I can't recall that he was. You know, he
3 might have, again, looked in, stuck his head in the
4 door or something. But I don't recall him being in
5 the room. If he was, it was very fleetingly.

6 Q Previously, you made reference to the
7 President's Air Force aide. Was that reference to
8 General McHugh?

9 A I didn't know who they were, to tell you
10 the truth. Still don't know who they were. And
11 they didn't stay long. They came about the time
12 the body was delivered, and they didn't--I mean, I
13 didn't concentrate on what these people were doing.
14 It really didn't interest me. I was empathetic
15 with their concern, but as far as otherwise, I
16 didn't have anything to do with them, or they with
17 me.

18 Q Previously, you made reference to the
19 commanding general for the military district of
20 Washington.

21 A Yes.

22 Q Was that General Wehle?

1 A You got me. You know, he told me, he said
2 he was in charge, and I heard later that that was
3 his role. I said to somebody else, "Who's that
4 guy?" And that's what they said; he's the CO of
5 the military district of Washington. I never saw
6 him before or since, didn't know who he was then.

7 Q Was he present at all during the autopsy?

8 A No, he was not. Or if he was, I didn't
9 know he was there. Let's put it that way. I don't
10 think he was at all.

11 Q Would you have recognized Joint Chiefs of
12 Staff as of 1963?

13 A No.

14 Q For example, Curtis LeMay, would you have
15 *
 recognized him?

16 A Oh, I'd recognize him if he was there, but
17 he was not.

18 Q Did you ever hear any speculation about
19 whether any members of the Joint Chiefs of Staff
20 were present at the autopsy?

21 A No, never heard, but if they were, it was
22 unknown to me totally. I doubt very seriously that

1 they were.

2 You asked me, would I recognize them?

3 Sure, you know, from newspapers and television, one
4 thing or another. I probably knew them all by
5 sight. But they weren't there.

6 MR. GUNN: Let's take a short break, a
7 couple minutes to get a drink of water.

8 [Recess.]

9 MR. GUNN: We're back on the record
10 following the first recess.

11 BY MR. GUNN:

12 Q Dr. Humes, when did you first see the body
13 of President Kennedy?

14 A I didn't look at my watch, if I even had a
15 watch on, but I would guess it was 6:45 or 7
16 o'clock, something like that, approximately.

17 Q Was the body in the casket when you first
18 saw it?

19 A Yes, it was in a casket.

20 Q Could you describe the casket in just very
21 general terms?

22 A Yes. It was a wooden casket with long

1 handles on both sides like you usually see for the
2 use of pallbearers and so forth. One of the
3 handles was broken. I forget which side it was on.
4 But it was a handsome--the standard of those
5 things. It was a good-looking casket.

6 Q Where did you first see the casket?

7 A As the people--I think they were sailors
8 that were--it was a Navy ambulance, a Navy
9 ambulance crew who had picked up the body at the
10 airport, and they brought it into the morgue and
11 promptly left.

12 Q Do you remember what color the ambulance
13 was?

14 A No--oh, gray. I saw it on television
15 later. And all our ambulances were gray in those
16 days.

17 Q Were you with the casket from the time it
18 was unloaded from the gray ambulance until you
19 opened the lid of the casket?

20 A I didn't go out on the loading dock. I
21 was there from the time it came through the door of
22 the morgue until the President left the next

1 morning.

2 Q How many rooms or hallways are there
3 between the loading dock and the morgue where you
4 first saw--

5 A Just a very brief hallway. I guess maybe
6 15, 20 feet, something like that. No rooms.

7 Q And was the casket opened in the morgue?

8 A Yes.

9 Q Who else was in the room when the casket
10 was opened?

11 A Oh, I can't tell you that. Dr. Boswell
12 and I removed the body from the casket, and I--I
13 don't know who. There were some enlisted helpers,
14 technicians from our department there, and I don't
15 know who else was there. I can't tell you. I was
16 too intent on what I was doing and too, to tell you
17 the truth, a little bit shook by the whole
18 procedure, initially at least. It was disturbing
19 to have a deceased President there in your arms,
20 you know. It's not an unemotional experience. But
21 I was not worrying about who was around or
22 whatever. It was the least of my worries.

1 Q Who else in addition to Dr. Boswell, if
2 anyone, helped you remove the body from the casket?

3 A I don't recall that anyone did, but I
4 don't gainsay the possibility that one of the
5 enlisted men may have helped. But nobody else.

6 Q How was the President's body wrapped?

7 A It was wrapped in white sheets and the
8 head was--head wound, massive head wound, was
9 covered with gauze sponges and gauze dressing.

10 Q Was there any plastic or rubber sheeting
11 at all near the President's head?

12 A No. Well, I'm not sure what finally tied
13 down the gauze bandage over the skull wound. It
14 might have been plastic or something, but, you
15 know, I don't know. Adhesive tape or God knows
16 what. It was easily removed. It wasn't tight at
17 all.

18 Q Was there any plastic sheeting or rubber
19 sheeting of any kind that you saw in the casket--

20 A No.

21 Q --with the exception of possibly with the
22 head?

1 A No.

2 Q From the time that you first saw the body
3 of President Kennedy, were you in the same room
4 with the body until it left Bethesda?

5 A One hundred percent of the time.

6 Q Other than the trip down the hallway, did
7 the body ever leave the morgue room?

8 A No.

9 Q Were you involved with the process of
10 unwrapping the body?

11 A Yes. Yes.

12 Q During that, did any skull fragments fall
13 out from the wrapping?

14 A Not that I recall.

15 Q Did any bullets or bullet fragments fall
16 out from the wrapping?

17 A No.

18 Q Could you describe how the President's
19 head looked at the very first time that you saw it
20 after it had been unwrapped?

21 A Well, the most obvious thing was a large
22 defect in the right parietal area. The

1 measurements are in the autopsy protocol, and the
2 hair was matted in that area and bloody and so
3 forth. And there was a suggestion like a contusion
4 in the right frontal area over the right eyebrow.
5 The skin was a little bit discolored in that area,
6 but it wasn't very remarkable. The most striking
7 thing was this large defect. His face was, for all
8 intents and purposes, normal. Normal as anybody
9 can be in death, I guess. It was not significantly
10 injured in any way.

11 Q Were any portions of the brain extruding
12 from any wounds in the head?

13 A Well, the wound was so big that--I don't
14 know what you mean by extruding. It wasn't really-
15 -it was just a gaping hole and the brain was right
16 there. It wasn't really being extruded, no.

17 Q So you could see it, but it was not as if
18 it were coming out--

19 A No.

20 Q --sort of just seeing inside a hole--

21 A It was a big hole, yeah.

22 Q Did you notice any surgical incisions

1 anywhere on the body of President Kennedy when you
2 first saw him?

3 A Yeah, there was a gaping defect that was
4 obviously a tracheotomy incision in the anterior
5 neck, and there were a couple of small--you never
6 heard much about this, either. A couple of small
7 incised wounds on the chest, and I forgot--I wrote
8 down, wherever I wrote it down, that it looked to
9 me like somebody was going to think of putting in a
10 chest tube. But they never did, because all they
11 did was go through the skin. They obviously--I
12 imagine they decided the President was deceased
13 before they were going to pursue it. But somebody
14 started, apparently, to insert chest tubes, which
15 would not be an unreasonable thing to do. They
16 were, you know, maybe two centimeters long,
17 something like that, and between the ribs, low in
18 the anterior chest.

19 I'm sure I described them in the protocol
20 someplace.

21 Q Were there any cutdowns on any of the--

22 A I think there was in one of the ankles.

1 There was a cutdown wound. I forget whether it was
2 the right or left ankle now, to tell you the truth.
3 If I had to guess, I'd say it was right, but I'm
4 not sure.

5 Q Did you see any other surgical incisions
6 or incisions that you thought might have been
7 surgically performed?

8 A No.

9 Q Anything in the head area at all?

10 A No.

11 Q Did you see any sutures?

12 A No--well, there might have been of the
13 cutdown on the ankle. There may have been some
14 black silk sutures there. I'm not absolutely
15 certain, but I think there might have been.

16 Q Anywhere else that you remember a suture?

17 A No.

18 Q I'd like to show you the document that's
19 been marked Exhibit 1, which is the first page of
20 the diagram, and the second page is the drawing of
21 the skull.

22 A Yes.

1 Q I'd like to ask you some questions about
2 this. First, was this document, Exhibit 1, in your
3 possession at any point during which you were
4 writing the autopsy protocol?

5 A Probably. Probably was. Over the
6 weekend, yeah.

7 Q I'd like to draw your attention to a few
8 items on the first page of this document. Right
9 next to the marking for brain, there's no entry of
10 a weight there. Do you see that on the document?

11 A Yes, I see that it's blank, yeah.

12 Q Why is there no weight for the brain
13 there?

14 A I don't know. I don't really--can't
15 * recall why.

16 Q Was the fresh brain weighed?

17 A I don't recall. I don't recall. It's as
18 simple as that.

19 Q Would it be standard practice for a
20 gunshot wound in the head to have the brain
21 weighed?

22 A Yeah, we weigh it with gunshot wound or

1 no. Normally we weigh the brain when we remove it.
2 I can't recall why--I don't know, one, whether it
3 was weighed or not, or, two, why it doesn't show
4 here. I have no explanation for that.

5 Q The same would be true also for the
6 thymus. Do you see that?

7 A Yes, well, the thymus in an adult, you
8 can't find--99 percent of the time it's not there.
9 It involutes after the age of about 12, and so
10 this--for 99 percent of adult autopsies, you'd
11 never find the thymus.

12 Q Okay. For the thyroid over on the right
13 column.

14 A Yeah.

15 Q There's no weight there. Do you know--

16 A It probably wasn't removed. I don't know.
17 Let me go back for one minute. I was told
18 find out what killed the man. My focus was on his
19 wounds. I didn't approach this like it was a
20 medical death due to some disease or whatever. I
21 was focusing primarily and almost exclusively on
22 the wounds. So I don't know. I don't know if I

1 weighed the thyroid or not.

2 Q Did you consider the autopsy to be a
3 medical-legal autopsy?

4 A Yes. Oh, sure.

5 Q And there was a gunshot wound to the neck,
6 wasn't there?

7 A Well, you'd better clarify that. There
8 was a big gaping tracheotomy wound in the anterior
9 neck. I learned later that there had been a
10 gunshot wound in that location, but I didn't know
11 it. That was 99 percent of my problem. There was
12 a bullet wound in the back above the scapula, like
13 I mentioned earlier, and there was a wound of
14 entrance in the back of the skull and a wound of
15 exit in the skull. Those were the wounds.

16 Q Could you look at the diagram on the right
17 side?

18 A Yeah.

19 Q Please, do you see in the head there is a
20 circle with an arrow pointing up and to the left?

21 A Yes.

22 Q Do you know what the arrow pointing up and

1 to the left signifies?

2 A I have no idea.

3 Q On the face sheet right next to the head,
4 it appears as if the words "ragged slanting" are
5 there. Do you see those words?

6 A Yeah.

7 Q Does that look correct to you, those
8 words?

9 A No, I don't think it was very ragged at
10 all. It was oval, oblong, and I don't recall
11 particularly ragged. Maybe the edges were a little
12 bit serrated, but I don't think I would have used
13 the term "ragged."

14 Q Do you know what slanting means in that
15 context?

16 A Well, I guess because it was oblong, it
17 might have been interpreted as slanting; whereas,
18 if it had entered at 90 degrees to the surface, it
19 wouldn't have been quite as slanting. Do you know
20 what I mean?

21 Q Yes.

22 A It would indicate to me that the wound--

1 the missile did not hit at a 90-degree angle with
2 the surface.

3 Q So it would be an oblong wound?

4 A Exactly.

5 Q That's the sense of what you--

6 A Right. That's how I would interpret
7 slanting. I think these are J's comments. I
8 didn't--I don't think I've written anything on this
9 piece of paper.

10 Q Okay. Do you see on the diagram--it's
11 actually true both for the left and the right
12 diagram--that there are two lines dividing what
13 roughly is at the neck?

14 A Yeah.

15 Q I assume that those are standard lines--

16 A They're on the form before anything else
17 is put on it, yes.

18 Q And what do those two lines signify?

19 A I don't know. I don't know who dreamed
20 this up, to tell you the truth. They don't signify
21 anything to me. In case you don't know where the
22 head and the torso join, I guess it would help to

1 show you. But, really, it's not very helpful.
2 Those lines are not helpful.

3 Q Okay. Down in the bottom left-hand
4 corner, do you see the handwriting?

5 A Yeah. Verified, George Burkley. That was
6 interesting that he verified it. I don't know why
7 he did that, who asked him to, or whether he
8 volunteered and he did. I have no idea.

9 Q You don't recollect having seen Dr.
10 Burkley sign this--

11 A No, I do not.

12 Q --at all?

13 A I do not. I guess there's the cutdown,
14 now that you tell me about it. It was, I guess,
15 drawn. It was on the left.

16 Q Could you turn to the second page, please?

17 A Sure.

18 Q I'd like you to help see if you can
19 explain to me what some of these things mean, and I
20 understand that you did not do this drawing
21 yourself. First, there is a line right in the
22 middle of the skull that says "10" with an arrow

1 going in either direction. Do you have any idea
2 what that means?

3 A I would think it's the width of the defect
4 that's portrayed--as you look at it, it's on your
5 left--the right side of the skull. I know, but
6 this is the same 10 as in there, and he puts arrows
7 back and forth that it was 10 centimeters wide.

8 Q Okay. And do you see right below that--

9 A Now, let me tell you. That couldn't be
10 too precise because it was not a nice, clean
11 whatever. It might have been 10 centimeters at one
12 point and 12 at another, or God knows what, you
13 know.

14 Q Okay.

15 A I was relying, through all of this, on my
16 photographs and my X-rays. I wasn't really worried
17 about these notes that J was making. It didn't--I
18 didn't tell him not to make them, and I didn't tell
19 him to make them. I didn't tell him anything. I'm
20 not displeased that he made them. That's fine.
21 But I was relying upon the photographs and the X-
22 rays to tell the story. I wish I had had a video

1 camera. Now, of course, I wish a lot of things.

2 But--

3 Q Were you anticipating at the time you were
4 performing the autopsy that you would have the
5 photographs and X-rays available for your
6 inspection at the time you were writing the autopsy
7 report?

8 A No, I never expected to have them when I
9 was writing the autopsy--he wanted the autopsy
10 report in, what, 36 to 48 hours. No, I didn't
11 anticipate I'd have them at that time.

12 Q When did he--he being Dr. Burkley, I
13 assume--when you said he wanted them in 36 to 48
14 hours?

15 A Autopsy report.

16 Q Yes.

17 A Before he left the morgue. Before he left
18 the morgue that night, he said he would like to
19 have the report, if we could, by 6:00 p.m. on
20 Sunday night.

21 Q And that was Dr. Burkley?

22 A That was Dr. Burkley.

1 Q Right below the middle of the skull, there
2 is the number 17 with, again, arrows pointing, at
3 least on the paper, up and down. Do you see that?

4 A Yeah. I would presume that this is the
5 antero-posterior maximum measurement of this
6 defect. Okay?

7 Q Okay.

8 A So it was 17 centimeters, fore and aft, if
9 you will, and 10 wide. I got some slightly
10 different measurement, I think, in my written
11 report, but ball park, you know.

12 Q Right below the 17 and the arrow, there's
13 the word, it looks as if it's "missing." Do you
14 see that?

15 A That much bone is missing. That was a big
16 defect, you see.

17 Q Now, when this 10 by 17 centimeters of
18 bone is missing, does that mean that it was present
19 nowhere in the autopsy room during the autopsy?

20 A Not until later when part of it was
21 brought to me, which I described, I believe, in the
22 written report.

1 Q So would it--

2 A The pieces that were brought to me, it was
3 either two or three, I think three: one pretty
4 sizable one and two smaller ones. Again, I'm
5 talking off the top of my head. When they were
6 repositioned to where they should have been, there
7 was still a defect. We didn't have sufficient bone
8 to totally close the defect.

9 Q So then from the first time that you saw
10 the President's head without the pieces of skull
11 fragment that came in later, the approximate
12 measurements of the missing scalp would be roughly
13 10 centimeters to 17 centimeters?

14 A By 17, right.

15 Q In the autopsy protocol, you referred to
16 the amount as being 10 centimeters by 13
17 centimeters, and let me show you the protocol.

18 A I'm not going to debate it. I mean, it
19 would depend on how you were measuring it, because
20 it wasn't a--like this room is 25 by 35. It's got
21 walls and extreme--this was irregular, so you could
22 make any kind of measurement you want, smaller than

1 that--you couldn't make it any bigger than we made
2 it, but you could make it smaller if you measured
3 it more anteriorally or more posteriorally,
4 whatever.

5 Q Sure.

6 [Pause.]

7 BY MR. GUNN:

8 Q Let me first show you page 3 of the
9 autopsy protocol.

10 A Right.

11 Q The first paragraph. In that paragraph it
12 refers to 13 centimeters as being the greatest
13 diameter. The question for you would be whether
14 any pieces of the skull fragments were put back
15 into place in order to reach the measurement of 13
16 centimeters.

17 A I can't--I have no explanation for that.
18 I don't know whether J's note is right or my
19 measurement is right. I don't know.

20 Q In this--

21 A Certainly I'm talking about--when I say
22 the wounds, I'm talking about the wounds before

1 anything was done to them, in other words,
2 primarily before anything happened.

3 Q When you say before anything was done to
4 them, that means before any skull pieces were--

5 A Yeah, before anything was put back--

6 Q --put back in or taken out?

7 A Exactly.

8 Q So it would be your understanding that the
9 13 centimeters in the numbered paragraph 1 would
10 refer to the skull as first seen after being
11 removed from the casket?

12 A That's correct.

13 Q Could you help me with some of the other
14 descriptions on the second page of Exhibit 1? And,
15 again, I understand that these were not written by
16 you. Can you read the writing over on the right
17 side of the document, the first word of which
18 appears to be "Falx"?

19 A "Falx"--I don't know whether that's "bone"
20 or what. Looks like "parasagittal." I can't--
21 don't know what that is.

22 Q Let me try what I read it and tell me

1 whether that makes sense to you or whether
2 something else--"Falx bone from sagittal sinus from
3 the coronal suture back."

4 A It could be. You'd better get J to tell
5 you what this is.

6 Q "Falx loose from sagittal sinus," is that-
7 -

8 A That's more likely. Yeah, the falx
9 cerebri, you know, it's one of the membranes, and
10 it was detached as part of the wound. I think that
11 makes more sense, yes.

12 Q So "falx loose," does that describe what
13 you saw during the autopsy?

14 A Yeah, I suppose so. I'm not going to
15 *
16 debate it now. It's kind of incidental to the
17 whole affair, as far as I'm concerned, but...

18 Q So would it be fair to say, then, that the
19 falx was loose from the coronal suture back--

20 A Right.

21 Q Okay.

22 A Coronal suture is the one that goes across
23 the middle, the top of the head.

1 Q On the diagram, over on the left side of
2 the skull, there is 10 with not an arrow but a dash
3 on either side of that. Do you have any
4 recollection of what that would mean?

5 A I think it's the same 10 that's present
6 with the arrows on either side of it, but your
7 guess is as good as mine, to tell you the truth.

8 Q Up at the top of the skull, there is a 3
9 cm, I assume 3 centimeters. Do you see that?

10 A Yes.

11 Q Do you have any knowledge about what that
12 would mean?

13 A I certainly don't.

14 Q And over on more towards the right, right
15 * below where it says "globe right eye," there is a
16 circle with a line or maybe a hook through it. Do
17 you see that?

18 A Yeah.

19 Q Do you know what that signifies?

20 A No. Well, it says something about
21 fractures through the floor of the--I would presume
22 of the anterior cranial fossa. There were all kind

1 of fracture lines, you see, in the skull from this
2 massive wound, and I presume that's one of the
3 fracture lines. I didn't detail all those for the
4 reasons that I stated in the protocol. They're
5 going this way and they're going that way, and, you
6 know, that's the way it goes.

7 Q Okay. If we go down to the bottom of the
8 skull, there are numbers written at the bottom, a
9 4, a 3, over a 6. Do you see those?

10 A Yeah.

11 Q Do you know what those signify?

12 A No.

13 Q Were there any injuries or fractures in
14 that portion of the skull?

15 A Well, yeah, I guess. Yes. Because the
16 wound was below there, you see. You're looking at
17 it from above, and the wound, the entrance wound
18 you wouldn't see on a view from the top. But there
19 were fractures in the posterior cranial fossa
20 radiating from the wound.

21 Q Okay. Do you see the very small, what
22 looks like a drawing down at the bottom of the page

1 that looks something like a half circle perhaps?

2 A Yeah.

3 Q Do you know what that is?

4 A I think it's just a gross depiction of the
5 configuration of the largest fragment that we got
6 from Dallas. I think that's what that is.

7 Q One last question on the drawing. There
8 are some dotted lines that go roughly around the
9 right perimeter, extending around to the left.

10 Again, do you have any idea what those dotted lines
11 signify?

12 A I'd have to guess they may be fractures,
13 but it's an educated guess.

14 Q Okay. At the time that you first saw the
15 body of President Kennedy, saw the skull, would it
16 be fair to say, based upon your prior testimony,
17 that there was a skull fragment or fragments
18 missing that would have been in the approximate
19 measurements of 10 centimeters by 13 centimeters or
20 10 by 17, approximately?

21 A Yes. That's right.

22 Q Was scalp missing from that same--from

1 those same measurements?

2 A Not as much scalp. There was some scalp
3 missing, but we were able to pretty much close the
4 scalp, skin, when we finished everything. So I
5 can't tell you how much was--but it was not that
6 much skin missing, no.

7 Q So mostly skull fragments--

8 A Right.

9 Q --but not the scalp itself?

10 A Right. Right.

11 Q Was there any scalp on any of the
12 fragments that you received later in the evening--

13 A No.

14 Q --that you referred to?

15 A No.

16 Q So there was no scalp that came to the
17 autopsy room--

18 A No.

19 Q --during the course of the autopsy?

20 A There was none.

21 Q When the embalming process was completed,
22 approximately how much scalp was missing?

1 A Oh, I don't know. Maybe three or four
2 centimeters, something like that. Not much. We
3 were able to--you can undermine the skin, you know,
4 and we pretty much closed it. We didn't have
5 enough bone to completely close that part of the
6 defect, and we had--one of the people who was
7 around and very helpful was our chief of surgery,
8 Dr. David Osborne. And we went to--he went to the
9 operating room and brought back some rubber dam,
10 which is material that is used in surgery not
11 infrequently to cover a variety of different kinds
12 of defects. And we used a rubber dam to help us
13 close the skull bone. But I don't think we had to
14 add anything to the scalp.

15 Q Approximately where was the missing scalp
16 as of the time that the embalming process was
17 completed?

18 A You got me--I don't think there was--I
19 mean, we were able to close it by undermining and
20 stretching and so forth. I don't recall that we
21 didn't completely close--I think we completely
22 closed the skin and the scalp.

1 Q Without stretching the scalp, just, you
2 know, basically how much scalp was actually missing
3 at the time that the body arrived at Bethesda?

4 A You know, I couldn't--it would be a rough
5 guess. Maybe four or five centi--three or four
6 centimeters, something like that. Probably,
7 because it was all torn, you see, with serrated--
8 and there were--it wasn't like a punch that was
9 punched out. It was torn apart, you know. So I
10 have a hard time estimating that.

11 Q Do you have any knowledge as to where the
12 missing skull--or missing scalp was?

13 A No. It wasn't that much, I'm telling you.
14 It was more torn than missing.

15 Q The next question I wanted to ask you
16 would be where, as best you recall, the lacerations
17 were on just the scalp.

18 A They went in every direction. They were--
19 I think I described them as stellate. So they went
20 down this way and back, and the whole area was
21 lacerated.

22 Q For the scalp?

1 A Yes.

2 Q In towards the back of the head, so in the
3 occipital--

4 A Not really. Not really. The parietal
5 region primarily. Parietal and to some extent
6 occipital, but primarily parietal.

7 Q Okay. Just for any scalp lacerations,
8 were there any tears over the occipital bone?

9 A No. No.

10 Q None whatsoever?

11 A No.

12 Q There were tears, however, over the
13 temporal--

14 A Temporal and parietal.

15 Q And the parietal.

16 A Yes.

17 Q And were there any tears over the coronal
18 area?

19 A Well, now you're talking about a line that
20 goes across like this. Whether or not any of these
21 tears extended to the coronal suture area, I can't
22 recall specifically. I wouldn't be surprised, but

1 I wouldn't also swear to it.

2 Q You mentioned that there was a rubber dam
3 in the embalming process. Where was that located?

4 A Well, it was not in the embalming process.
5 When they got finished embalming, we had to put--we
6 didn't have to, but we helped them put the scalp
7 back together and the skull. And the defect that
8 remained in the skull--I can't now measure it
9 specifically--was three or four or five
10 centimeters, something like that. And we used a
11 rubber dam to cover that part of the skull defect.

12 Q And where was that located?

13 A Well, I can't--it was part of this large
14 defect, and I can't tell you now exactly where it
15 was.

16 Q When you say part of this large defect,
17 you mean in the parietal area?

18 A Right.

19 Q Did you notice any wounds that appeared to
20 be incisions--

21 A No.

22 Q --in the scalp at all?

1 A No. None.

2 Q Or any in the skull below?

3 A No.

4 Q After the body was placed on the table,
5 having been brought out of the casket, what was the
6 general order of procedures that you followed?

7 A Take photographs, first off, and X-rays.

8 Q Did you take photos and X-rays before you
9 did any cleaning of the head?

10 A Yes.

11 Q Did you replace or remove or rearrange any
12 fragments of bones at all before taking
13 photographs?

14 A No.

15 Q Did you make any incisions at any place
16 before taking the photographs?

17 A Well, depending on which photographs
18 you're talking about. We didn't photograph the
19 wound in the occiput until the brain was removed,
20 you know. Sure, we had to make an incision to
21 remove the brain and so forth, but no, generally
22 speaking, no, we didn't make any incisions at all.

1 Q You previously have seen the photographs
2 that were taken at the autopsy; is that correct?

3 A Only once--1966.

4 Q Didn't you see some of the photographs
5 during the time that you met with the HSCA panel?

6 A Well, I guess they had some of them there.
7 That was kind of a confused affair, and I--did I
8 have the photographs in my hands to look at? No.

9 They had some blow-ups that they were trying to use
10 to demonstrate to the panel, I guess, and I found
11 them very difficult to interpret, to be perfectly
12 candid with you. I had problems with them.

13 Q There is one photograph, or one series of
14 photographs that shows what looks to be a gaping
15 wound in the head with the scalp reflected.

16 A Yeah.

17 Q Other than that series of photographs,
18 were the remainder of the photographs all taken at
19 the beginning of the autopsy, do you recall?

20 A Virtually all of them were, yeah.

21 Q Do you remember--

22 A There's only basically two that weren't.

1 One was the inside of the occipital region, which
2 we interpreted as the wound of entrance, for
3 obvious reasons, and one that never came--whatever
4 happened to it, I was very disturbed by it. We
5 took one of the interior of the right side of the
6 thorax because there was a contusion of the right
7 upper lobe of the lung. So the missile had passed
8 across the dome of the parietal pleura and contused
9 the right lobe. I wanted to have a picture of
10 that, and I never saw it. It never--whether it was
11 under-exposed or over-exposed or what happened to
12 it, I don't know. And it's three years later when
13 we were looking at it, of course. But we didn't
14 see that photograph. So that was taken later, and
15 the one of the inside of the skull was taken later.
16 But all the rest of them were taken at the onset of
17 examination.

18 Q Okay. With regard to X-rays, when were
19 they taken in relationship to the photographs?

20 A I would guess that most of the X-rays were
21 taken prior to any of the photographs. But, I
22 mean, I just don't have that crystal clear in my

1 mind. But I think so. I think most of them were
2 taken before.

3 Q Were any skull fragments rearranged or put
4 into place or removed prior to the time that the
5 first X-rays were taken?

6 A No.

7 Q Were any skull fragments rearranged or
8 moved at any time during any time that there was an
9 X-ray of the cranium?

10 A No. No.

11 Q So there was no reconstruction whatsoever?

12 A No. There was nothing to reconstruct.
13 No.

14 Q During the course of the autopsy, did you
15 have any X-rays available for your inspection?

16 A Yes.

17 Q Developed X-rays?

18 A Yes. We had them all.

19 Q Did you use all of the X-rays that you
20 were aware of--

21 A Sure.

22 Q --during the course of the autopsy?

1 A Yes. Weren't particularly helpful, but we
2 used them, yeah.

3 Q Do you have any recollection now about
4 radio-opaque objects being in or appearing in the
5 X-rays?

6 A Yes, in the skull. There were some little
7 tiny fragments of radio-opaque material, which we
8 thought to be bullet fragments, traversing from--
9 well, I don't know. It looked like it was going
10 from posterior to anterior. Very fine, sort of
11 granular-looking material, went almost as far
12 forward as the frontal bone, but not quite that
13 far.

14 Q Those are dust-like fragments?

15 A Yes, right.

16 Q Were there any--

17 A A couple of them were--we did retrieve a
18 couple that were maybe a couple millimeters, as I
19 recall, from that path, you know. But that was
20 about all.

21 Q Do you recall where you retrieved those
22 fragments?

1 A I think from the frontal lobe of the
2 brain.

3 Q Were there any X-rays taken between the
4 time that you--or after the time that you removed
5 the small fragments?

6 A No.

7 Q So all of the X-rays of the cranium were
8 taken before any--

9 A Exactly.

10 Q --metal fragments were removed?

11 A Exactly, exactly.

12 Q Do you have any recollection now about the
13 shapes of the fragments that were removed?

14 A They were small and irregular. That's all
15 I can tell you.

16 Q Long and sliver-like or roundish or--any
17 recollection?

18 A Flat, irregular, two or three millimeters.

19 Q When was the first incision made at
20 Bethesda, as best you recall?

21 A Well--

22 Q Let me withdraw that question. My

1 question is not so much what time it was, as
2 whether it's 8 o'clock or 8:15 or 8:30.

3 A Yes, okay.

4 Q But just let me start out first: Where
5 was the first incision made?

6 A I believe, of course, the top of the skull
7 to remove the skull plate of the brain. To remove
8 what remained of the calvarium and to approach the
9 removal of the brain.

10 Q And was that incision simply of the scalp,
11 or did you need to cut--

12 A No, we had to cut some bone as well.

13 Q Where did you make the incision on the
14 scalp?

15 A Where we usually--in the coronal plane,
16 over the coronal suture. Of course, half of it was
17 already--I mean, you know, it wasn't a neat
18 incision because part of it was over the large
19 defect that was already present.

20 Q So did you make any incisions in the scalp
21 other than the one that would be roughly from
22 either right to left or left to right, roughly over

1 the coronal--

2 A No, we didn't make any others.

3 Q So there were none front to back along--

4 A No. There were lacerations of the scalp
5 in several different directions, but, no, we didn't
6 make any other incision.

7 Q Where did you cut the bone?

8 A I find that--it's hard to recall. Once we
9 got the scalp laid back, some of those pieces could
10 just be removed, you know, by picking them up,
11 picking them up because they were just not held
12 together very well, other than by the dura, I
13 suppose. So other than that, we probably made it
14 like we normally do, in a circumferential fashion
15 from books, like right above the ear around. But
16 it was a real problem because it was all falling
17 apart, the skull. And I can't recall the details
18 of exactly how we managed to maneuver that, because
19 it was a problem.

20 Q Who was involved in the process of removal
21 of the brain?

22 A I was.

1 Q Did anyone else assist you with that?

2 A Maybe J. I'm not sure now. I mean, it's
3 not a two-man job particularly. You have to cut
4 across the top of the spinal cord, of the medulla
5 to--you know, you just make one incision. I mean,
6 it's not a major thing for a lot of people to be
7 involved with.

8 Q Were there any lacerations in the area of
9 the mid-brain?

10 A Yes.

11 Q What kinds of lacerations?

12 A They were length-wise. There was one
13 length-wise in the mid-brain, and--it's hard to
14 describe, you know. From my memory now, there
15 were--and there weren't a lot--there weren't too
16 many very extensive ones, but they were very
17 extensive--very serious location, is what the
18 problem was. They were right in the mid-brain.
19 And they were probably due to disruption by the
20 force of the blow rather than by the particular
21 passage of any missile, I would guess.

22 The photographs, again, depict these

1 problems.

2 Q I'd like to hand you a drawing that we
3 will number Exhibit No. 71, which is labeled the
4 brain and the cranial nerves.

5 My question for you first will be: Is
6 this a reasonably fair description of the brain and
7 cranial nerves?

8 A Yes, well, it's a lateral view, sagittal
9 view.

10 Q When you say that there were lacerations,
11 if I understood correctly, in the mid-brain, could
12 you point to where that is on the diagram? Not
13 where the diagram says that there was a mid-brain,
14 but where the lacerations were.

15 A Well, first of all, they weren't
16 laterally. They were posteriorally. They weren't
17 laterally. So you don't have the right plane to do
18 it, okay? But they, as I recall, were--I can't
19 show them because this would have to be sideways,
20 you see.

21 Q Okay.

22 A I can't do it. I don't know how well I'm

1 going to do it when you give me the other one from
2 memory, to be quite candid with you about it.

3 Q Would this diagram help you?

4 A Well, it's better, but it's...well, the
5 problem with this diagram is that it's, roughly
6 speaking, cut along the coronal suture, because you
7 have the large ventricles open, and back here in
8 the back of the brain where this was, you don't
9 have that picture, but basically they were in this
10 vicinity. I'm not going to mark up this book, but
11 they were in this vicinity here. See, this is
12 supposed to be the skull, I presume, and you
13 transect the--whether it's the spinal cord or the
14 brain stem, whatever you want to call it, you do it
15 at the foramen magnum, which is this space here,
16 and you transect it at that point, and so then
17 you're left with this. But you don't have this big
18 fourth ventricle. So it's really hard to--they
19 were in this vicinity here.

20 Q Okay.

21 A Just above where we transected the brain
22 stem.

1 Q Okay. Back to Exhibit 71, would it be
2 fair to say that it is roughly in the portion right
3 below the cerebellum?

4 A Yes. The cerebellum was somewhat
5 disrupted, as I recall, as well. But the
6 photographs of the brain show it to you very
7 clearly.

8 Q Would you mind making a mark on this
9 document? It can just be a point or a circle, if
10 that's more accurate, and I can make a photocopy of
11 the other diagram, if you would prefer, of just
12 where you're understanding the laceration to be in
13 the mid-brain.

14 A It's really hard to do it from--very
15 difficult to do from these kind of drawings. It's
16 just they don't lend themselves to what you're
17 trying to do, I'm sorry to tell you.

18 Q Would you be able to do a drawing yourself
19 that would be--

20 A No. I'm the world's worst artist. I tell
21 you, if you'll forgive me for saying so, we're
22 doing a lot of nitpicking here that I'm having

1 difficulty with, you know. It doesn't lend itself
2 to what you're trying to have me do.

3 Q I'm just trying to understand where the
4 laceration was or where the disruption was or--

5 A Well, you're asking me to recall from
6 memory, and I'm having a very difficult time with
7 that, and I'm referring you to the photographs
8 which we took of this part of the brain. I can't
9 do that very well. I'm sorry. It's just I'm not
10 that clever.

11 Q What did you do with the brain when it was
12 removed from the cranium?

13 A Placed it in formalin. The blood vessels
14 were somewhat disrupted. Normally we would inject
15 the brain with formalin through the basal artery or
16 some place. But some of these arteries were
17 disrupted, and I can't recall--don't ask me exactly
18 where the disruptions were. But the brain was
19 damaged, and it didn't lend itself well to infusing
20 it like we normally do. So we placed it in a very
21 generous quantity of 10 percent formalin in a, you
22 know, specimen container.

1 Q Was that a sealed container or some other-

2 -

3 A It has a lid, but it's not sealed in the
4 way a jar is sealed. It's like a pail, really,
5 that you have a lid put on it. For the brain, for
6 that, we use it routinely for that purpose. I
7 don't think we were able to inject it. I don't
8 believe that we were.

9 Q But a standard container--

10 A For brains, right.

11 Q For brains.

12 A Sort of like a three-quarter gallon can.
13 I don't know what the volume of it is, but you can
14 put the brain in and totally immerse it in
15 formalin.

16 Q Were any sections taken at all from the
17 brain?

18 A Not at that time. Some place else I
19 showed you, the report you showed, we did take
20 certain sections a day or two later, whatever it
21 was, from the location--we didn't divide the brain
22 like we often do. You know, we often make a so-

1 called bread loaf-type incision. Some people do it
2 fore and aft. Some people do it different ways.
3 But we didn't do that with this brain, because the
4 next thing you know George Burkley wanted it. We
5 might have gone on to do that, but when he came and
6 said that they wanted the brain, fine, you know.
7 I'm not going to argue about it.

8 Q After the brain was removed, what was the
9 next thing that you did in the autopsy?

10 A The next thing we did was look at this
11 wound that was in the back of the skull. It was
12 obvious from both the point of entrance and inside
13 the skull, and we examined that very carefully,
14 measured it, took pictures of it.

15 Q Did you identify a hole that you thought
16 to be either an entrance or exit wound in the back
17 of the cranium?

18 A Definitely. Definitely. Entrance, there
19 wasn't any question in our mind about it.

20 Q Did the wound appear as something like a
21 puncture in the bone, or was there a fragment of
22 the bone that was missing and that there was an

1 indentation?

2 A No. It was directly beneath the scalp
3 wound back there, directly beneath it. It was
4 almost round, but a little bit more ovoid, and the
5 inner margins of it were shelved. If we put a BB
6 through that glass over there on the side where it
7 went in, you'd see a little round hole, depending
8 on the size of the missile. On the other side,
9 you'd see shelved out, and that's exactly what we
10 had.

11 Q And the whole circumference of the entry
12 wound was visible without any reconstruction of the
13 skull?

14 A Oh, yeah, sure.

15 Q In which bone was the entrance wound?

16 A Occipital bone.

17 Q After you examined the occipital bone,
18 what did you next do in the autopsy?

19 A Well, we looked with care at the margins
20 of the defect in the skull, and we found a similar
21 situation where the bone fragments that were
22 placed--that remained in place, halfway in place,

1 were shelved on that outer table of the skull. And
2 when we got the fragments from Dallas, they were
3 similarly--we almost could complete the circle of
4 what appeared to be the actual exit wound because
5 it was shelved on the outer table, and we almost
6 could put it all together, that wound. Not the
7 defect, but the wound.

8 Q So unlike the wound in the occipital bone,
9 the wound towards the front, there was a nick or a
10 half-circle or some such thing showing what you
11 understood to be the exit, and you were able then
12 to complete that wound when the fragments came?

13 A When the fragments came, almost, because
14 they're all flying around, you know. These
15 * fragments are--it's like, you know, working with
16 clouds, because they were--you had to put them
17 together with great care to make that out.

18 Q Approximately how much time did you spend
19 examining the cranium after the brain was removed?

20 A Oh, you know, that's really hard to
21 estimate. I would guess maybe 30, 45 minutes,
22 something like that.

1 Q Was there any other examination that you
2 made of the cranium at that time?

3 A Well, we looked with care at the whole
4 interior surface of the skull to see if there were
5 any other defects or what have you. There were no
6 others. Of course, the one that was hard to
7 evaluate, of course, was the exit, because it was
8 all disrupted.

9 Q Were there any fragments or breaks in the
10 left hemisphere of the cranium, looking from the
11 inside?

12 A I can't recall how far over some of these
13 fractures--whether they crossed the midline or not.
14 I really can't recall.

15 Q When you finished--or did you return to
16 examine the cranium at any subsequent point during
17 the autopsy?

18 A No.

19 Q What did you do next?

20 A Well, we looked at this wound in the upper
21 part of his neck, and we made a customary Y-shaped
22 incision to do the rest of the autopsy and removed

1 the breast plate, which was standard operating
2 procedure, and examined the inside of the thorax.
3 And that's when we saw the contusion of the dome of
4 the upper lobe of the right lung, and we wondered,
5 Where's the bullet? You know. Should have called
6 Dallas right then and there. It would have saved
7 me a lot of worry and grief for several hours,
8 because X-rays hadn't found it for us. Like it
9 could have been in his thigh or it could have been
10 in his buttock. It could have been any damn place.
11 We don't know where it went. It was obvious after
12 we talked to the doctors the next morning where it
13 went. It went out. That's why we couldn't find
14 it. And we weren't going to spend the rest of the
15 night there, you know.

16 Meantime, George Burkley is telling me,
17 you know, the family wants to get out of here
18 sometime tonight. Then we proceeded with the
19 dissection of the lungs, heart, and abdominal
20 contents and so forth.

21 Q Do you recall approximately where in the
22 procedures that Dr. Finck arrived?

1 A Oh, pretty early. As soon as I saw the
2 nature of the thing, before we did anything, I
3 called Dr. Smith back and said, you know, send us
4 this chap. I didn't know him. I had never laid
5 eyes on him before. And so I would say around the
6 time we were taking X-rays, photographs, or both.

7 Q Was he--Dr. Finck--there at the time the
8 cranium was being examined?

9 A Oh, sure. He was there through the whole
10 examination, basically. If he missed anything, it
11 was when we were taking the preliminary photographs
12 and stuff.

13 Q Approximately how far through the
14 examination did you first locate the wound on the
15 posterior thorax?

16 A Oh, right away. It was obvious. It was
17 no secret. It was right there. But we directed
18 our attention first to the wound that we were
19 certain was the fatal wound, of course, the head
20 wound.

21 Q Were you aware of the posterior thorax
22 wound at the time you lifted the body out, or was

1 that--did you turn the body over?

2 A We weren't aware of anything when we
3 lifted the body out, but we understand in Dallas
4 they never did turn him over.

5 Q So when did you first turn the body over
6 to see that wound?

7 A Oh, I can't--probably right away. As soon
8 as we got him on the table, we probably--part of
9 the external examination right away before we did
10 anything.

11 Q During the time that you were performing
12 the autopsy, did you ever identify what you took to
13 be the margin of a wound in the area of the trach
14 incision?

15 A No.

16 Q Approximately when during the autopsy did
17 the fragments arrive, the skull fragments?

18 A Oh, quite late. I couldn't tell you
19 exactly what time, you know.

20 Q Was that after the Y incision had been
21 performed?

22 A Oh, yeah. It was quite late. I couldn't

1 say. Maybe it was 10, 11 o'clock, 12 o'clock. I
2 don't know what time it was.

3 Q I believe you said earlier today that it
4 was your recollection that there were three
5 fragments that arrived.

6 A I think so. The one quite sizable, and
7 the other two a little smaller, considerably
8 smaller. I think. I mean, I'd have to go back.
9 You know, you're asking me something--you realize
10 how long ago this was.

11 Q We appreciate that these are more than 30
12 years ago, so we understand that.

13 A My wife tells me I can't remember what
14 happened last week sometimes. Or this morning, as
15 far as that goes.

16 MR. GUNN: Let's go off the record for a
17 moment.

18 [Recess.]

19 MR. GUNN: We can go back on the record.

20 BY MR. GUNN:

21 Q Dr. Humes, I'd like to ask you some
22 questions now about records that were created

1 during the course of the autopsy and at any point
2 through the time that the autopsy protocol was
3 completed.

4 First, did you yourself take any notes
5 during the autopsy?

6 A Yes, I took some. And--yes. That's the
7 answer to your question.

8 Q How many pages of notes did you take,
9 approximately?

10 A Oh, I can't tell you now. Maybe two or
11 three.

12 Q Did you see anyone else taking notes
13 during the autopsy?

14 A Dr. Boswell.

15 Q Do you recall anyone else having written
16 anything?

17 A No.

18 Q Specifically, do you remember Dr. Finck
19 having written any notes?

20 A No, I do not. I don't say he didn't, but
21 I don't recall that he did.

22 Q Were autopsies tape-recorded at Bethesda

1 in your experience?

2 A Intermittently. We didn't record any of
3 the session on this case.

4 Q On the case of President Kennedy?

5 A No.

6 Q Was the decision made not to record the
7 autopsy?

8 A I don't think any real thought was given
9 to it, to tell you the truth.

10 Q Do you know how frequently autopsies were
11 recorded?

12 A No, I don't. We were just getting into
13 the business of doing that. It's awkward to have
14 equipment around the autopsy table and so forth,
15 and we were really just starting to experiment with
16 foot controls, devices, and so forth and so on.
17 And so not often.

18 Q Were there any minutes taken of the
19 autopsy?

20 A I don't know what you mean by minutes, but
21 other than the notes that I or Dr. Boswell made, I
22 don't believe there were any such, no.

1 Q There wasn't any person responsible for--

2 A No.

3 Q --taking down minutes of the autopsy?

4 A No.

5 Q What other kinds of records were typically
6 created in the course of an autopsy? For example,
7 would there be any log that would have recorded the
8 receipt of the body?

9 A Yes.

10 Q With that example in mind, what other
11 written records were created that would relate to
12 the autopsy of President Kennedy?

13 A That's about it. Everybody that came into
14 the morgue was logged in and logged out when they
15 left, and who picked it up, you know, the funeral
16 home, most usually.

17 Q Were there logs for photos or X-rays?

18 A No. Not in the morgue, no.

19 Q Were there any kinds of logs or record-
20 keeping of what kinds of tests or sections were
21 made?

22 A Well, not really. You know, we made

1 sections of most of the organs and put them in
2 cassettes and turned them over to the technical
3 people, and they processed them from there.

4 Q Is there any record-keeping process that's
5 used to help identify which tests have been sent
6 where and when they've been returned?

7 A Well, we didn't send many things anywhere,
8 so far as that goes. I don't believe so, no.

9 We had a very elaborate laboratory. We
10 had very little need to send anything anywhere.

11 Q But would there be any paper that would
12 keep track of where things were even within the
13 laboratory at Bethesda?

14 A Well, every--talking about autopsies,
15 every autopsy was identified by a number, and every
16 cassette that contained tissue specimens was
17 labeled with that autopsy number. And there was a
18 log in the histology laboratory that kept a record
19 of all those things, sure.

20 Q Would there be other similar logs for
21 radiology or toxicology?

22 A Toxicology was part of our lab, and yes,

1 it would be. I can't speak for radiology. I'm
2 sure they kept very good records of where their
3 films were. Their biggest problem is people taking
4 out films and failing to bring them back and so
5 forth. It's a chronic problem in radiology
6 departments around the world.

7 Q At the time in the ordinary course when
8 you would prepare an autopsy protocol--and I'm not
9 speaking now of President Kennedy--would you
10 receive written reports back that analyzed the
11 results of any examinations that had been
12 performed?

13 A Yeah. Again, let me tell you that for
14 most of the latter part of my career, I didn't
15 personally do these kinds of things. The younger
16 doctors did them under our supervision, and then
17 they would write a report, and then we would
18 critique the report with them and so forth. The
19 name of one of the staff pathologists would be on
20 the final report, but 99 percent of the effort was
21 done by other people than the person who actually
22 signed the report.

1 Q How would those records be filed or kept
2 in the ordinary course? I mean, for example, would
3 there be a folder with the autopsy number on it
4 with the serology report and the histology report--

5 A Right.

6 Q --and other things--

7 A Well, what you would do, you see, it was
8 rare cases that you had to do toxicology at the
9 autopsy room. The hospital was not a forensic
10 science center. So we would abstract--most of the
11 patients that we autopsied died as a result of
12 illness while they were hospitalized. So the
13 person who did the autopsy would make what's called
14 a clinical summary. He would abstract from the
15 *
16 person's clinical record how long he was in the
17 hospital, what was the main problem, what were the
18 complications, what were the results of significant
19 laboratory tests. And we used to try and teach
20 them to have a diarrhea of thought and a
21 constipation of words. That was one of my phrases
22 that all my residents used to always kid about.
Excess words were not helpful. That's what we--and

1 the final report, different people do it--I worked
2 in a hospital in Detroit for 19 years. There we
3 bound in a book by year every autopsy protocol. We
4 weren't doing that at Bethesda when I was there.
5 We'd just keep them in files, you know.

6 There's all kind of ways different people
7 devise to keep records.

8 Q What other kinds of records would you
9 expect to find in a typical Bethesda autopsy
10 protocol from 1963? If you pulled out a folder,
11 what records would you expect to find in it?

12 A The autopsy report, period, and this other
13 information would be included. You wouldn't have
14 other--you wouldn't have copies of the tests that
15 were done, for instance. That would have been
16 abstracted and included in one final document.

17 Q What would be done with the results of the
18 tests if they're not kept in the folder?

19 A They'd go in the patient's file, in the
20 clinical file.

21 Q Do you know whether there was any other
22 sort of file for President Kennedy at Bethesda?

1 A Not that I'm aware of.

2 Q Now, I'm thinking back from memory and I
3 may be wrong on this, but maybe you can help with
4 this. Was President Kennedy ever treated at
5 Bethesda while he was alive?

6 A I'm not sure. I just don't know.

7 Q Do you know whether if he was treated
8 there when he was alive, as well as while
9 President, would any of the records from his
10 autopsy conceivably have been sent to his patient
11 file?

12 A No. I don't believe so. Those records
13 were all--you know where they are. They weren't
14 sent anywhere, because they were all sent to the
15 White House, within three days. Nothing was
16 retained.

17 Q Well, were there any histology reports at
18 all that you ever physically held in your hand from
19 President Kennedy's autopsy?

20 A The ones that are recorded in that
21 supplemental autopsy report.

22 Q There are references to that, but I'm now

1 referring to any documents themselves. Did you
2 ever see any documents?

3 A No. I mean, we dictated them, and then
4 the results were put in the file--in the
5 supplementary report.

6 Q What were you looking at at the time that
7 you made the dictation of the results?

8 A The microscopic slides for the various--

9 Q The slide tissue cells?

10 A Oh, sure. All of which we turned over to
11 the Secret Service. I presume they're in the
12 Archives some place. I never saw them again.

13 Q Could you explain or describe briefly the
14 process that you went through in drafting the
15 autopsy protocol? So explain the number of drafts
16 that you wrote, for example.

17 A The decision was made somebody had to take
18 responsibility to write it. We couldn't do it as a
19 troika. So I took the notes home with me, these, I
20 presume, and the notes that I had made, some of
21 which I had made were stained with the President's
22 blood. I wrote a little bit about this in that AMA

1 article.

2 Around that time, we had in the government
3 what was called the People to People Program, and
4 the Navy Medical Department's part of that was to
5 bring medical officers from foreign countries to
6 the United States to teach them how the Navy
7 Medical Department functions with the Marine Corps,
8 with the submarines and so forth. These people
9 would be in Washington for 10 weeks. Five weeks
10 they would visit activities in the metropolitan
11 Washington area, and five weeks they would go on
12 field trips. They would go to New London,
13 Connecticut. They'd go to Camp Lejeune, North
14 Carolina. They'd go to Pensacola, Florida, all
15 kind of places, Great Lakes Naval Training Center.

16 I occasionally was asked to be an escort
17 for these people. There'd be 18 to 20, 25 doctors
18 from foreign countries. Sometimes we had Greeks
19 and Turks at the same time, for instance. They
20 weren't always the greatest plans in the world, I
21 tell you. But you would escort these guys around.
22 You'd get them on airplanes. You'd get them in

1 buses. It was a real--it was real interesting.

2 On one trip, we took them to Pittsburgh to
3 show them industrial medicine at steel mills and
4 the medical department of a steel mill. We took
5 them to Detroit and took them to the Ford Motor
6 Company so they could see how the medical
7 department of a large car company functioned.

8 While there this particular trip, we took
9 them to Greenfield Village. I don't know if any of
10 you have been to Greenfield Village. It's a very
11 fascinating place where Henry Ford acquired all
12 sorts of buildings and structures from around the
13 United States, and in Europe, to some extent, and
14 had them physically moved to Detroit. For
15 *
16 instance, Edison's Menlo Park Laboratory was
17 totally taken apart and brought to Greenfield
18 Village, including the trash pile that was in the
back yard.

19 Also in Greenfield Village, there is an
20 old Illinois courthouse where Lincoln used to
21 preside when he was circuit-riding judge. And in
22 that courthouse was a chair that was alleged to be

1 the chair in which Lincoln sat when he was
2 assassinated in Ford's Theater. And the docent, in
3 describing this chair, proudly spoke that here on
4 the back of the chair is the stain of the
5 President's blood. The bullet went through his
6 head. I thought this was the most macabre thing I
7 ever saw in my life. It just made a terrible
8 impression on me.

9 And when I noticed that these bloodstains
10 were on this document that I had prepared, I said
11 nobody's going to ever get these documents. I'm
12 not going to keep them, and nobody else is ever
13 going to get them.

14 So I copied them--and you probably have a
15 copy in my longhand of what I wrote. It's made
16 from the original. And I then burned the original
17 notes in the fireplace of my family room to prevent
18 them from ever falling into the hands of what I
19 consider inappropriate people.

20 And there's been a lot of flack about
21 this, that they're all part of a big conspiracy
22 that I did this because I was involved in I don't

1 know what I was involved. Ludicrous. That is what
2 I did.

3 Q When you made reference to the notes that
4 you copied out, were you referring to the document
5 that's marked Exhibit 2, or is that something
6 different?

7 A Now, this is the product of--yeah. It's
8 the product of those notes.

9 Q The question would be whether there were
10 notes that you copied down as one document and then
11 you used the notes in order to draft the document
12 that's in your hand.

13 A The only thing that was retained was this.

14 Q Exhibit 2?

15 A Right.

16 Q Now, I presume that the notes that you
17 took during the autopsy did not resemble in any way
18 the document that you have in your hand now,
19 Exhibit 2.

20 A Well, they did, yes. I mean, I didn't
21 dream this up out of whole cloth.

22 Q Certainly I understand the content, but

1 I'm just referring to the text that is written in
2 Exhibit 2 tracks reasonably closely the language of
3 the final report. And what I'm interested in is
4 what the two to three pages of notes looked like.

5 A I can't recall. I mean, I--they would
6 have been my shorthand version of what you're
7 looking at here, basically, in my own shorthand
8 manner, whatever it may have been.

9 Q You would agree, I assume, that the
10 document you're holding in your hand, Exhibit 2, is
11 a basically completed autopsy protocol that tracks
12 the language of the final autopsy protocol that's
13 Exhibit 1?

14 A Yes.

15 Q And I assume that the notes that you made
16 while you were at Bethesda during the autopsy were
17 not written in sentence and paragraph form.

18 A No. They were shorthand.

19 Q So what kinds of things, then, were
20 written on it? Measurements?

21 A Measurements, yeah, sure. Primarily
22 measurements. That's where these measurements came

1 from.

2 Q So when you drafted--well, first, was
3 there any other draft of the autopsy protocol other
4 than the one that you're holding in your hand now--

5 A No.

6 Q --Exhibit 2?

7 A No. There was not.

8 Q So when you wrote down the information--
9 well, when you were drafting what is now Exhibit 2,
10 would it be fair to say that you had in your hand
11 two or three pages, approximately--

12 A Right.

13 Q --of handwritten notes--

14 A And I converted the shorthand information
15 there to that document.

16 Q When you say "that document," you're
17 referring to Exhibit 2?

18 A Yes, exactly.

19 Q Was there any information that was
20 contained on the handwritten notes that was not
21 included in the document that's now Exhibit 2--

22 A I don't believe so.

1 Q Did you ever make a copy that--a copy of
2 the notes that contained the same information as
3 was on the original handwritten notes that was in
4 any form other than the form that appears in
5 Exhibit 2?

6 A No.

7 Q Have you ever observed that the document
8 now marked Exhibit 1 in the original appears to
9 have bloodstains on it as well?

10 A Yes, I do notice it now. These were J's.
11 I'm sure I gave these back to J. I presume I did.
12 I don't know where they came from.
*May 10, 1964
he turned
it in
it
it
it*

13 Q Did you ever have any concern about the
14 President's blood being on the document that's now
15 marked Exhibit 1?

16 A I can't recall, to tell you the truth.

17 Q Do you see any inconsistency at all
18 between destroying some handwritten notes that
19 contained blood on them but preserving other
20 handwritten notes that also had blood on them?

21 A Well, only that the others were of my own
22 making. I didn't--wouldn't have the habit of

1 destroying something someone else prepared. That's
2 the only difference that I can conceive of. I
3 don't know where these went. I don't know if they
4 went back to J or where they went. I have no idea.
5 I certainly didn't keep them. I kept nothing, as a
6 matter of fact.

7 Q I'd like to show you the testimony that
8 you offered before the Warren Commission. This is
9 in Exhibit 11 to this deposition. I'd like you to
10 take a look at pages 372 to the top of 373, and
11 then I'll ask you a question.

12 A All right.

13 Q I'll read that into that record while
14 you're reading it yourself. Mr. Specter asked the
15 question: "And what do those consist of?" The
16 question is referring to some notes. "Answer: In
17 privacy of my own home, early in the morning of
18 Sunday, November 24, I made a draft of this report,
19 which I later revised and of which this represents
20 the revision. That draft I personally burned in
21 the fireplace of my recreation room."

22 Do you see Mr. Specter's question and your

1 answer?

2 A Yes.

3 Q Does that help refresh your recollection
4 of what was burned in your home?

5 A Whatever I had, as far as I know, that was
6 burned was everything exclusive of the finished
7 draft that you have as Exhibit--whatever it is.

8 Q My question will go to the issue of
9 whether it was a draft of the report that was
10 burned or whether it was--

11 A I think it was--

12 Q --handwritten notes--

13 A It was handwritten notes and the first
14 draft that was burned.

15 Q Do you mean to use the expression
16 handwritten notes as being the equivalent of draft
17 of the report?

18 A I don't know. Again, it's a hair-
19 splitting affair that I can't understand.
20 Everything that I personally prepared until I got
21 to the status of the handwritten document that
22 later was transcribed was destroyed. You can call

1 it anything you want, whether it was the notes or
2 what, I don't know. But whatever I had, I didn't
3 want anything else to remain, period.

4 This business, I don't know when J got
5 that back or what.

6 Q When you say "this business," you're
7 referring to Exhibit 1?

8 A Exhibit 1, right.

9 Q Dr. Humes, let me show you part of your
10 testimony to the HSCA. Question by Mr. Cornwell--
11 I'll read this into the record. It's from page
12 330, and it is Exhibit 21 to this deposition.

13 "Mr. Cornwell: And you finally began to
14 write the autopsy report at what time?"

15 * "Dr. Humes: It was decided that three
16 people couldn't write the report simultaneously, so
17 I assumed the responsibility for writing the
18 report, which I began about 11 o'clock in the
19 evening of Saturday November 23rd, having wrestled
20 with it for four or five, six hours in the
21 afternoon, and worked on it until 3 or 4 o'clock in
22 the morning of Sunday, the 24th."

1 "Mr. Cornwell: Did you have any notes or
2 records at that point as to the exact location of
3 the--"

4 "Dr. Humes: I had the draft notes which
5 we had prepared in the autopsy room, which I
6 copied."

7 Now, again, the question would be: Did
8 you copy the notes so that you would have a version
9 of the notes without the blood on them but still
10 notes rather than a draft report?

11 A Yes, precisely. Yes. And from that I
12 made a first draft, and then I destroyed the first
13 draft and the notes.

14 Q So there were, then, two sorts of
15 documents that were burned: one, the draft notes,
16 and, two, a draft report?

17 A Right.

18 Q Is that correct?

19 A That's right. So that the only thing
20 remaining was the one that you have.

21 Q Why did you burn the draft report as
22 opposed to the draft notes?

*It is my opinion
as you will
see*

A I don't recall. I don't know. There was no reason--see, we're splitting hairs here, and I'll tell you, it's getting to me a little bit, as you may be able to detect. The only thing I wanted to finish to hand over to whomever, in this case Admiral Burkley, was my completed version. So I burned everything else. Now, why I didn't burn the thing that J wrote, I have no way of knowing. But whether it was a draft or whether it was the notes or what, I don't know. There was nothing left when I got finished with it, in any event, but the thing that you now have, period.

My opinion

Q Well, the concern, of course, is if there is a record related to the autopsy that is destroyed, we're interested in finding out what the exact circumstances--

A I've told you what the circumstances were. I used it only as an aide-memoire to do what I was doing and then destroyed it. Is that hard to understand?

Q When I first asked the question, you explained that the reason that you had destroyed it

1 was that it had the blood of the President on it.

2 A Right.

3 Q The draft report, of course, would not
4 have had the blood of--

5 A Well, it may have had errors in spelling
6 or I don't know what was the matter with it, or
7 whether I even ever did that. I don't know. I
8 can't recall. I absolutely can't recall, and I
9 apologize for that. But that's the way the cookie
10 crumbles. I didn't want anything to remain that
11 some squirrel would grab on and make whatever use
12 that they might. Now, whether you felt that was
13 reasonable or not, I don't know. But it doesn't
14 make any difference because that was my decision
15 and mine alone. Nobody else's.

*Went alone
no one
no one
no one
and no
never had
this question*

16 Q Did you talk to anyone about your decision
17 to--

18 A No, absolutely not. No. It was my own
19 materials. Why--I don't feel a need to talk to
20 anybody about it.

*not
his
no question
asked
about it*

21 Q Did the original notes that you created
22 have any information with respect to the estimated

1 angle in which the bullet struck the President?

2 A Nothing different than what's in the final
3 version.

4 Q Did the original notes that you took
5 identify the location of the posterior thorax
6 entrance wound with respect to which of the
7 vertebra of the President the wound was closest to?

8 A No. The measurements were taken from bony
9 landmarks. As I recall, one was a mastoid process,
10 the bottom of the--behind the ear, and the other
11 was a midline of the vertebral column, not how many
12 vertebrae down it was. So the up-and-down
13 measurement would be the distance from the mastoid
14 process down.

15 Q When you recorded it a being from the
16 right mastoid process, was it your understanding
17 that the right mastoid process was a fixed body
18 landmark?

19 A Oh, sure. It doesn't move around in most
20 people. You're really in trouble if it does.

21 Q Well, is it a fixed landmark, fixed body
22 landmark with respect to the thoracic cavity?

1 A It's fixed with regard to respect anything
2 you want it respected to.

3 Q Well, if your head turns to the right or
4 to the left, does the mastoid process distance vary
5 with relationship to--

6 A Well, maybe a millimeter or two. Not
7 significantly.

8 Are we getting into a big debate as to
9 whether I did anything properly here or not? It's
10 not a debate I want to get involved in.

11 Q I'd like to show you a document that's
12 marked Exhibit 6, which appears on its face to be a
13 death certificate for President John F. Kennedy,
14 signed by George Gregory Burkley on November 23,
15 1963?

16 A Right. Never saw it before.

17 Q You've never seen Exhibit 6 before?

18 A No, sir.

19 Q I'd like to draw your attention to the
20 first sentence of text on the second page and ask
21 if you would read that, please.

22 [Pause.]

1 THE WITNESS: He's sort of mixing his
2 metaphors. He's mixing the wounds up in here, but
3 I presume when he says the wound was shattering
4 type, it's the wound of the skull.

5 BY MR. GUNN:

6 Q You're welcome to read as much as you
7 would prefer.

8 A Whatever.

9 Q It's just I have a question for you on the
10 first sentence only.

11 A Okay.

12 Q You see that Dr. Burkley identifies the
13 posterior back at about the level of the third
14 thoracic vertebra. Do you see that?

15 A Yes.

16 Q Was that correct?

17 A I don't know. I didn't measure from which
18 vertebra it was. It's sometimes hard to decide
19 which vertebra, to tell you the truth, by
20 palpation. Maybe you can do it accurately because
21 the first and second--did I say the third? Oh, he
22 says third thoracic. I think that's much lower

1 than it actually was. I think it's much lower than
2 it actually--you have seven cervical vertebrae. I
3 don't know. I mean, he's got a right to say
4 anything he wants, but I never saw it before, and I
5 don't have an opinion about it.

6 Q Did you ever discuss which vertebra--

7 A I never discussed anything about it with
8 George Burkley, period, or anybody else.

9 I mean, with all due respect, you seem to
10 have come to me from left field. You know, I just--
11 they're not things of which I'm aware.

12 The measurements I made, as far as I'm
13 concerned, were accurate. You could debate whether
14 they were wise choices to be made or not, but they
15 were accurate.

16 Q When did you sign the autopsy protocol
17 that is now marked Exhibit 3?

18 A Late Sunday afternoon.

19 Q Where was it that you signed it?

20 A In Admiral Galloway's office. His
21 personal--it was decided his secretary was an
22 appropriate person to--she normally wouldn't do

1 this work for me at all because I had my own
2 people. But I guess he felt that it was--she was a
3 good person to do it. That's all. It didn't make
4 a difference to me who did it. It was a mechanical
5 chore, as far as I was concerned.

6 Q Who else was in the office at the time
7 that you signed the protocol?

8 A Pierre and J.

9 Q And they were the only two others there?

10 A Mm-hmm.

11 Q Was anyone in the room immediately next to
12 where you were?

13 A Admiral Galloway was in and out that
14 afternoon. I don't know if he was there or not at
15 that point, to tell you the truth.

16 Q Was he waiting for you to sign the
17 document, or you were just in his office?

18 A I can't tell you what he was doing there.
19 When we were working on it, we made some minor
20 changes in it. He came in and told us that Ruby
21 shot Oswald, which was the shock of the day, of
22 course. And I don't know how long he stayed, to

*Thurs. 11/22/68
This was
much earlier
than when he
left the
Galloway*

1 tell you the truth. I don't know if he was there
2 when I left or not.

3 Q Did anyone at any point, other than Drs.
4 Finck and Boswell, make any suggestions to you
5 about the content of the autopsy report?

6 A It seems to me that Admiral Galloway made
7 some comments, but I don't recall precisely what
8 they were, because he was there while we were doing
9 it.

10 Q Did he ask you to make any changes in the
11 autopsy protocol?

12 A I don't think so.

13 Q Did he ask you to make any changes that
14 would be of any substantive importance?

15 A Certainly not. I think he made a
16 suggestion--and it wasn't a bad one--to insert the
17 word "presumably" a couple of times, because they
18 were presumptions. We didn't know who shot who or
19 anything about it, you know. But our conclusions
20 were that this was probably the entrance wound,
21 this was probably the exit wound. I think he
22 thought--he said it would be wise to use that

1 verbiage, and I didn't have any problem. That's
2 the only suggestion I recall he made.

3 Q After you signed the autopsy protocol,
4 what did you do with it physically yourself?

5 A Physically, got a staff car and carried it
6 to the White House.

7 Q How many did you take to the White House?

8 A I think the original and six, it says. I
9 mean, I don't keep that number in my mind, but
10 whatever it was.

11 Q Original and a few copies?

12 A Leaving one in Admiral Galloway's office,
13 which was subsequently taken there.

14 Q Okay. And was there more than one signed
15 original?

16 A No.

17 Q Was there any draft protocol that you had
18 written prior to that time that had been signed?

19 A Nothing other than what you have.

20 Q So the one we have is the only signed
21 protocol?

22 A Yes, sir.

1 Q After you signed the protocol and
2 delivered it to Admiral Burkley in the White House,
3 what was the next thing that you did that had
4 connection with the autopsy or supplemental reports
5 of the--

6 A I presume when we got the micro slides
7 processed, which was, I don't know, Monday or
8 Tuesday, or some day at the beginning of the week.
9 Reviewing those and writing the report that was the
10 supplementary report.

11 Q Earlier in the deposition today, you made
12 reference to a sectioning of the brain, if I
13 understood correctly, that took place one or two
14 days afterwards.

15 A Yeah.

16 Q Did that happen within one or two days
17 after?

18 A Yes. Shortly after. I can't tell you
19 what day now.

20 Q If Dr. Boswell and Mr. Stringer said that
21 it took place two or two to three days afterwards,
22 would that make sense to you?

1 A I have no--yeah, could well be.

2 Q What did you do in the course of the
3 examination of the brain that took place shortly
4 after?

5 A We took photographs of the separated--now
6 we have the brain in a pail, and removed it from
7 there, took photographs from both above and below,
8 and took these representative sections that we
9 mentioned there.

10 Q Was the brain fixed by that time?

11 A Yes. Pretty well fixed.

12 Q Approximately how much time did you spend
13 on that examination of the brain?

14 A Oh, I don't know. I would say an hour or
15 * two, something like that.

16 Q Where did that examination take place?

17 A In the laboratory, the main laboratories
18 of the hospital, medical school.

19 Q Are you able to connect in time the
20 difference in time between the time that you
21 delivered the autopsy protocol to Admiral Burkley
22 and the time that you examined the brain?

1 A I just said earlier it took, you know--I
2 don't know--a couple of days, two or three days. I
3 don't know exactly how long.

4 Q Was that a couple of days after the
5 November 22nd autopsy?

6 A A couple of days after Sunday, after they
7 were delivered. I don't know. In that week some
8 day. I don't really know. It didn't seem to be
9 important to me at the time, and still doesn't,
10 quite candidly.

11 Q You suggested earlier that--and this is
12 also true that it also appears in the JAMA article-
13 -that Dr. Burkley suggested to you that the Kennedy
14 family wanted to inter the brain with the
15 President.

16 A He wasn't suggesting. He told me flat out
17 that the decision has been made and that Robert
18 Kennedy was their emissary and he was going to take
19 the brain and deliver it to Robert Kennedy.

20 Q Did you ask or wonder how they would be
21 able to inter the brain if the President had
22 already been buried?

1 A No. I didn't worry about it one way or
2 the other.

3 I would presume that they could devise a
4 method of doing that without too much difficulty,
5 however.

6 Q I'll show you a document that I believe
7 you have seen before, earlier in the deposition,
8 No. 19, which is a memorandum by Andy Purdy to the
9 file dated August 17, 1977, which contains his
10 notes from interviewing Dr. Burkley. I'd like you
11 to take a look at the paragraph in the center of
12 page 5.

13 Let me read it for the record, and then
14 I'd like to get your response to it. Within the
15 paragraph, Mr. Purdy, reporting on his conversation
16 with Dr. Burkley, says, "Says he"--referring to Dr.
17 Burkley--"was responsible for saving the brain
18 after it was fixed in formalin. Burkley decided to
19 keep the brain rather than put it back in the body,
20 as Dr. Humes wanted to do."

21 Is that accurate?

22 A That's absolutely false. I don't know

1 where he got these ideas. I never put a brain back
2 in a body in my life. Hundreds and hundreds of
3 autopsies that I've done, and I certainly wouldn't
4 put this one back in the body. It's ridiculous.
5 And he had nothing to do with it. Not a thing.

6 God, that really--I can't believe some of
7 this stuff. George is a fine man. I have great
8 respect for him as a physician. But this must have
9 spun his wheels or something. I don't know what
10 happened, but he--this absolutely did not happen.
11 I wouldn't dream of it.

12 It's just annoying as the devil--forgive
13 me, but it is. And I say, I've never seen this
14 document before. Just as well, because I'd just
15 have been annoyed for longer if I had. It makes no
16 sense.

17 Q At the time the interview was conducted,
18 the House Select Committee on Assassinations was
19 attempting to determine the location of the
20 President's brain, and there was evidence that
21 Admiral Burkley had been in possession of the brain
22 at one point.

1 A Yes.

2 Q And so they were pursuing that question
3 with him, and so the context is they are trying to
4 find out where it is.

5 A They're not going to find any help from
6 me. I handed it to George Burkley, and that was
7 the end of that.

8 Q In this statement, he does not make
9 reference to wanting to inter it with the body of
10 the President.

11 A All I can tell you is that's what he told
12 me. Now, whether that was true or not, I have no
13 way of knowing. That's what he told me, and I'm
14 reporting it factually, period. It didn't bother
15 me one way or the other. It seemed to me that that
16 was perfectly appropriate. And how they were going
17 to do it, you know, that was no big problem, I
18 don't think.

19 And there's a mention in that thing of two
20 bullets. I don't know what he's talking about. I
21 mean, it's--makes no sense. The whole thing makes
22 no sense. This was what, '77 you say?

1 Q Yes.

2 A That was then 14 years after the event. I
3 don't know how old George was at that point. I'm
4 not sure.

5 Q After the examination of the brain and the
6 review of the sections, what was the next thing
7 that you did in preparation for the supplementary
8 autopsy report?

9 A I presume I examined the sections of the
10 various organs that we had had caused then to be
11 made.

12 Q Do you have a recollection as to
13 approximately how long after the autopsy that was
14 done?

15 A It was just two or three days. The
16 technicians worked very assiduously and got them to
17 us relatively quickly.

18 What's the date on the delivery of the
19 supplementary report?

20 Q There's no date originally on the report.
21 It's not dated. There's a handwritten date that's
22 written elsewhere on it.

1 What's your best recollection as to when
2 the supplementary--

3 A Before the end of the week, I would guess.

4 Q So if the assassination was on the 22nd,
5 on a Friday, does that mean approximately--and I
6 understand we're dealing approximately here--

7 A By the end of the following week, the
8 29th, or whatever, the 30th.

9 Q Did you personally deliver to Admiral
10 Burkley the brain?

11 A Yes.

12 Q Did you receive a receipt for that?

13 A If I did, I no longer have it. I don't
14 recall, quite candidly. I do not have it. I've
15 been through all the papers that I have. I do not
16 have it. So I can't tell you whether I did or
17 didn't.

18 Q We have not been able to locate any
19 receipt of that sort through all of the records.
20 Do you have any idea where a copy of that receipt
21 might be?

22 A I don't think there ever was one. I don't

1 think there ever was one.

2 Q In addition to the brain and the sections,
3 was there any other biological matter that was
4 given to Dr. Burkley--

5 A No.

6 Q --by you?

7 A No. Well, the blocks, the paraffin blocks
8 from which the sections were made, yeah.

9 Q Did you deliver those to Admiral Burkley
10 in the White House, or did he come--

11 A No, I think he came out. I did not take
12 them to the White House. That I do know.

13 Q Do you have a recollection of the
14 approximate timing of when he came out to pick up
15 those?

16 A I can't recall. I don't know when.

17 Q Do you know whether it was before or after
18 the supplementary report was completed?

19 A Oh, it had to be after that, but I don't
20 recall when.

21 Q What we would like to do at this point is
22 bring in some of the autopsy photos, and I'd like

1 to ask you some questions about those.

2 A Sure.

3 MR. GUNN: We'll take a short break.

4 [Recess].

5 MR. GUNN: We can go back on the record.

6 I will state that we have now been joined by Steve
7 Tilly and Martha Murphy of the National Archives,
8 and we are now examining the original autopsy
9 photos.

10 I will state for the record that the first
11 set of photos that Dr. Humes is looking at are in
12 the series that are described in the November 10,
13 1966, inspection as "left side of head and
14 shoulders," and they are photos number--black and
15 white photo Nos. 1, 2, 3, and 4, and color photos
16 Nos. 29, 30, and 31.

17 BY MR. GUNN:

18 Q The first question for you, Dr. Humes:
19 Are these the photos that you previously have
20 identified as being the autopsy photos of President
21 Kennedy?

22 A Yes, sir.

1 Q Earlier in the deposition, I asked you
2 about whether there were any procedures that were
3 taken on President Kennedy before the photos were
4 taken, and it was my understanding that you said
5 that there had been no cleaning and no incisions
6 made.

7 A Correct.

8 Q Would that be true for the photos that
9 you're looking at right now?

10 A Yes.

11 Q Dr. Humes--

12 A Other than as you remove the dressing from
13 the head, it's possible that coming off with some
14 of the gauze that was there, some of the blood
15 might have been removed. But it wasn't a
16 deliberate attempt to clean it up.

17 Q Sure. No cleaning, no combing of the hair
18 or anything of that sort?

19 A No. No, no, no, no.

20 Q The side that you're looking at is the
21 left profile; is that correct?

22 A Correct.

1 Q Do you see or do you recall having seen
2 any lacerations on the left side of the skull?

3 A No.

4 Q Did you at any point during the autopsy,
5 presumably after these photos were taken, make any
6 incisions on the left side of the--

7 A Other than when we went to remove the
8 brain, the coronal incision would have come down to
9 above the left ear.

10 Q Okay. Could we now look at what we're
11 identifying as the second view, which was
12 identified as the "right side of head and right
13 shoulder"? And for the record, those are black and
14 white Nos. 5 and 6. and color Nos. 26, 27, and 28.

15 Dr. Humes, do you recognize these as being
16 the original and authentic autopsy photos of
17 President Kennedy?

18 A Yes, sir.

19 Q I'd like you to look at the object that
20 looks somewhat triangular right over the right eye
21 of President Kennedy. Do you see that triangular
22 mark?

1 A Yes.

2 Q Was that triangular mark made by any
3 incision that was caused at Bethesda?

4 A No.

5 Q Can you identify or explain whether
6 anything on that triangle appears to have been a
7 surgical incision?

8 A No. I think it's a result of the
9 disruptive missile that left the President's skull
10 in that vicinity.

11 Q Immediately above the right ear is a
12 somewhat triangular but not exactly triangular-
13 shaped object. Can you explain what that object
14 is?

15 A That's a flap of skin that's turned back.

16 Q And is it turned back from the front
17 towards the back of the head--

18 A Towards the bottom of the hair. It would
19 approximate here if you put the two of them
20 together, if it comes down like that, I would
21 think.

22 Q So a flap that is coming down towards the

1 ear; is that correct?

2 A Yes. With the hair behind it, you see.

3 Q In the area above the left eye--and this
4 is back to the triangle that I mentioned before--
5 there is a white object that is, appears to be
6 perpendicular on two sides and somewhat rounded on
7 the other side. Do you see that?

8 A A piece of skull.

9 Q Is that broken skull or is that--are you
10 able to tell?

11 A Am I able to tell what?

12 Q Is that skull intact within the cranium,
13 or is that a piece that has broken out?

14 A No, I think it's still fixed at its base.

15 Q Okay. And right opposite that to the
16 left, there is a sharp line almost creating another
17 V.

18 A Right.

19 Q Can you identify what that object is
20 immediately to the left?

21 A Another piece of skull. I don't think
22 there's any question about it.

1 Q And is that piece of skull intact, or is
2 that piece broken off?

3 A No, I think it's fixed inferiorally.

4 Q Near the top of the President's head,
5 there is matter that is extruding. What is that
6 matter?

7 A That's scalp reflected that way.

8 Q Does that consist of any brain tissue, or
9 is that entirely scalp, as best you can tell?

10 A I think it's just scalp.

11 Q Do you see in this photograph or these
12 photographs any brain tissue at all?

13 A Not that I can identify, no.

14 Q If we could go now to the next view, which
15 we will call No. 3, No. 3 consists of photographs
16 described as "superior view of head," which
17 correspond to black and white photo Nos. 7, 8, 9,
18 and 10, and to color photographs 32, 33, 34, 35,
19 36, and 37.

20 Dr. Humes, do those photographs appear to
21 be authentic autopsy photos--

22 A Yes, sir.

1 Q --of President Kennedy?

2 A Mm-hmm.

3 Q Do you have any reason to doubt their
4 authenticity?

5 A None whatever.

6 Q Dr. Humes, do you see any brain tissue
7 extruding from the wounds of President Kennedy in
8 those photos?

9 A I regret that they're not more sharp than
10 they are.

11 Q When you're saying "sharp," you're
12 referring to the focus?

13 A Yeah. I can't be absolutely certain
14 whether there's brain at the base of this or it's
15 just all scalp that we've reflected off, because
16 the superior surface of the brain, other than off
17 to the one side, was pretty much intact, as you
18 see--you got the brain pictures some place?

19 Because you'll see that. So I don't really think
20 that that's brain, no. I don't think so.

21 Q I note along the left of the midline there
22 appears to be a rather sharp or straight--not

1 exactly straight--line. Can you--

2 A Scalp folded back.

3 Q Is that the result of a surgical incision?

4 A No. Heavens, no.

5 Q Did you pull the scalp back at all in
6 order to be able to have a better view of the
7 injury?

8 A Yes, I probably did.

9 Q Was the hair combed in any way to help
10 make--

11 A No. The hair was not disturbed in any
12 way.

13 Q Would it be fair to say that this
14 photograph was taken before the Y incision was
15 performed?

16 A Oh, sure.

17 Q And you can see on the chest that the Y
18 incision has not been performed--

19 A Right.

20 Q --is that correct?

21 A Like I told you, we directed our attention
22 to the head wound first before we did it.

1 Q Previously, I showed to you a line that
2 goes what appears to be along the edge of the
3 scalp. I'd like you to look at another lines that
4 appears to go right down the middle almost of the
5 parasagittal sinus. Do you see that line?

6 A Yeah, but I think you're making more of it
7 than there is. I think that's just where the skin
8 fold was laid back.

9 Q Is there a break in the skull at that
10 point?

11 A I'm not sure. I would guess that it well
12 may be, but I can't see it in the scalp at this
13 point.

14 Q I'd like you to look at the object that
15 appears very roughly over where the right ear would
16 be. Do you see that?

17 A Are you talking about this dark-colored
18 material?

19 Q It is a--

20 A That's a piece of bone there. That's a
21 piece of bone, I think. That's the edge of one of
22 the--that's the edge of the wound. It corresponds

1 with that V-shaped thing you saw in the picture
2 before where you had those fragments. That's one
3 of them.

4 Q Okay. And you're pointing now at a line
5 that goes--

6 A Not the whole line. Just this piece right
7 here. This is bone.

8 Q Sure. The margin of--the left margin of
9 the bone?

10 A Yeah, right.

11 Q And that corresponds with the V in the--

12 A I think so, with part of those two pieces
13 that you saw from the lateral view.

14 Q And the two pieces that you're referring
15 to have to do with the bone and not the V that was
16 over the forehead in the scalp?

17 A V over the forehead? I don't know what
18 you're talking about now. This is a piece of the
19 skull, I do believe, you see. In that picture, you
20 had two pieces. You only see one of them well
21 here.

22 Q I just want to make sure that we can

1 identify this. If a person were looking at photo,
2 looking at it from the right of the photo, it would
3 be probably the first piece of skull that one would
4 see coming from the right.

5 A Yeah. I think this--

6 Q We need to make this clear on the record
7 when you're pointing to this. So when you say
8 "this," you're referring to View No. 3.

9 A Right.

10 Q Corresponding--and the piece of bone that
11 is in the far right on View No. 3 corresponding to
12 the piece that is approximately in the very center
13 of the photograph in View 2.

14 A Correct.

15 Q Is that correct?

16 A That's correct, in my opinion.

17 Q If we could turn to View 4, please? View
18 4 has been described as "the posterior view of
19 wound of entrance of missile high in shoulder," and
20 it corresponds to black and white photo Nos. 11 and
21 12 and color photos Nos. 38 and 39.

22 Dr. Humes, do those photographs appear to

1 be the original and authentic photographs from the
2 autopsy of President Kennedy?

3 A Yes.

4 Q Prior to the time that the photographs in
5 View 4 were taken, was there any cleaning of the
6 hair or scalp of President Kennedy?

7 A It looks like there might have been. I
8 can't recall specifically. There was probably
9 still some blood involved there. We may have
10 cleaned that off slightly. I don't recall.

11 Q When you said "there," you were pointing
12 at the bottom of the hairline; is that correct?

13 A Yes.

14 Q Dr. Humes, could you explain why the ruler
15 or the measuring device is in that photograph?

16 A Just to record visually the size of the
17 wound.

18 Q Is the measuring device designed in this
19 particular photograph to show the relationship to
20 any other landmark in the body?

21 A It looks like it may be down the middle of
22 the spinal column, but I can't be sure that that

1 was the intent. It may well have been, and it
2 looks like it might--I don't know. It's a little
3 crooked. It seems to go like so, so I can't say.
4 It may have been lined up along the vertebral--the
5 spine of the vertebrae, but I can't be sure.

6 Q Were there any other injuries on the back
7 of President Kennedy other than those that are
8 exposed to--

9 A Well, you say those. I don't know what
10 this little dot down below is.

11 Q Let's take them one at a time. There is
12 one mark that appears to be high at approximately
13 the second-centimeter line.

14 A Yes.

15 Q Is that the wound that you were
16 identifying as the wound of entry?

17 A Yes, sir.

18 Q And when you were referring to the mark
19 somewhat below, you were referring to something at
20 approximately the six-centimeter mark?

21 A Yeah, I don't know what that is. A little
22 drop of blood or what, I have no idea.

1 Q Was there more than one wound of entry--

2 A No, there was not.

3 Q And you're reasonably confident that the
4 wound of entry is the one that is at the higher--

5 A Yes, sir, I am.

6 Q Is that correct?

7 A Yes, sir.

8 Q I'd like to show you a photographic
9 enlargement of one portion of this photograph that
10 was reprinted by the House Select Committee on
11 Assassinations as Figure 5. It is marked as
12 Exhibit MI 3. It comes from Volume 7 of the HSCA
13 report at page 86. I'd like to ask you whether you
14 can independently correlate the wound as enlarged
15 * on Exhibit MI 3 with the wound that you have
16 described as the entry wound on photograph--

17 A I really can't. I don't have any way of
18 knowing what this would look like when magnified to
19 that extent. I don't know. Could be, but I have
20 no firm opinion about it.

21 It seems distorted to me, that particular
22 view.

1 Q When you're saying "distorted," you're
2 referring to Exhibit MI 3?

3 A Yes.

4 Q Can you identify an abrasion collar on the
5 wound on View 4?

6 A Not with certainty.

7 Q Did you ever identify an abrasion collar
8 on the wound on the posterior thorax?

9 A I don't remember, to be perfectly candid.

10 Q Was a section taken of the posterior
11 thorax wound?

12 A I believe so.

13 Q Dr. Humes, I've put before you a drawing
14 from Grant's Anatomy that shows the posterior
15 portion of a human skull. Do you see that?

16 A Yes.

17 Q Where the occipital bone is identified?

18 A Mm-hmm.

19 Q I'd like to mark this document as Exhibit
20 72. I'd like to ask you now, Dr. Humes, if you can
21 tell me where there were any missing pieces of
22 skull on the back of President Kennedy's head, if

1 there were any, that can be seen within the--

2 A I'm confused by this drawing. What is
3 this? Is that the teeth?

4 Q Yes. That's from the--

5 A This is a funny--it's a strange way to
6 depict the posterior portion of the skull, is all I
7 can tell you. There was no significance. It was
8 just a hole. But it was further down, you see. It
9 wasn't way up here.

10 Q I note here is the external occipital
11 protuberance.

12 A Yes.

13 Q Sir, could you show me first on Exhibit 72
14 where the wound was, approximately, in relationship
15 to--

16 A Not without referring to my notes. I
17 don't have that number in my mind. Or referring to
18 the report that you have, the autopsy report.

19 Q Okay. Let me try another question. Can
20 you describe generally where there was any missing
21 bone from the posterior portion, to the best of
22 your recollection?

1 A There basically wasn't any. It was just a
2 hole. Not a significant missing bone.

3 Q So a puncture hole--

4 A Puncture hole.

5 Q And no bone missing--

6 A No.

7 Q --anywhere in the occipital--

8 A No, no. Unless maybe--you know, these
9 drawings are always strange. Unless the part of
10 this wound extended that far back. I don't think
11 it did, really. Most of it was parietal temporal.

12 Q So on the scalp of President Kennedy here,
13 still in View No. 4, that underneath the scalp the
14 bone was all intact with the exception of the
15 puncture wound--

16 A Yeah.

17 Q --and perhaps some fragment--

18 A In the back of the skull, back, yes, sir.

19 Q Okay. So all of the skull that is within
20 the range in View 4 would have been in place,
21 though there may be fractures in it and there would
22 be a puncture hole? Other than that, that view

1 shows--

2 A But it's a guessing game, you see. The
3 head seems to be retroflexed a little bit. You
4 know, it's--to get me to say what's under here or
5 under here, I can't do that.

6 Q Could we now look at the sixth view?
7 Excuse me, the fifth view.

8 [Pause.]

9 MR. GUNN: The photographs that Dr. Humes
10 is now being shown have been described as "wound of
11 entrance in right posterior"--let me withdraw that.
12 Off the record for a moment.

13 [Discussion off the record.]

14 MR. GUNN: Okay. We are now on the fifth
15 view, which corresponds to black and white Nos. 13
16 and 14 and color Nos. 40 and 41, with the
17 description being the "right anterior view of head
18 and upper torso, including tracheotomy wound."

19 BY MR. GUNN:

20 Q Dr. Humes, do those photographs appear to
21 be the original and authentic photographs from the
22 autopsy of President Kennedy?

1 A Yes, sir.

2 Q Do the eyes of President Kennedy appear to
3 be open in these photographs?

4 A Yes.

5 Q Were the eyes, in fact, open during the
6 autopsy, do you recall?

7 A The picture shows me that they were.

8 Q If other photographs did not have the eyes
9 open, would you be able to explain the difference
10 in that appearance?

11 A I don't know. I might, I guess. I don't
12 know.

13 Q Does that help at all explain the timing
14 in which the photographs may have been taken?

15 A No. It may have been, but the timing...

16 Q In the second view, we were looking at a
17 triangle that was slightly above the left eye. Do
18 you see that triangle in this same photo?

19 A Yeah, I see it in the--yeah, I see it in
20 both of them.

21 Q As far as you can tell, that would be the
22 same triangle that was identified previously?

1 A I think so.

2 Q And there is what appears to be a flap
3 that is immediately above the left--or above the
4 right ear?

5 A Yes.

6 Q Is that flap the same flap that you noted
7 in View No. 2?

8 A I think so.

9 Q Do you see the tracheotomy wound in
10 President Kennedy's neck?

11 A Yes, sir.

12 Q Did you take any action at Bethesda that
13 increased the size of the tracheotomy?

14 A I don't think so. I don't believe so. We
15 didn't need to. It was wide open.

16 Q Is that how the wound appeared to you when
17 you saw the body of President Kennedy?

18 A Yes, sir.

19 Q You don't notice any difference in size?

20 A No. The thing is that when we first--I
21 think we noticed this when we first saw these
22 pictures. There's a suggestion at the inferior

1 margin of this wound that might be a portion of the
2 actual missile exit, a little notch, what looks
3 like a notch there.

4 Q So you're referring to a notch at the
5 bottom of--

6 A Of the incision.

7 Q Of the incision.

8 A Mm-hmm.

9 Q I'm showing you a document now that's
10 marked MI Exhibit 6, which also is taken from a
11 reproduction of the House Select Committee on
12 Assassinations. Are you able to correlate the
13 blow-ups in MI 6 with the photographs in View No.
14 5?

15 A Well, I guess so. My problem is they get
16 distorted when they blow up like this, you know.
17 But it's certainly not unlikely that that's a--you
18 know.

19 Q In the bottom photograph in MI 6, there's
20 something labeled Figure 9, and I see at the bottom
21 of that photograph there is a somewhat niched
22 figure.

1 A Right.

2 Q Does that seem to correspond to some
3 extent with the niche that you had noted?

4 A Yes, I think it does. Yes.

5 Q Okay. Could we go to the sixth view,
6 please? View 6 was described as "wound of entrance
7 in right posterior occipital region," and it
8 corresponds to black and white Nos. 15 and 16 and
9 color Nos. 42 and 43.

10 Dr. Humes, do you recognize the photos
11 before you now as being original and authentic
12 photographs from the autopsy of President Kennedy?

13 A I presume they are.

14 Q Is there any question in your mind?

15 A No, not really. No. They are.

16 Q I'd like to show you documents marked MI
17 5, MI 1, and MI 2 and ask you whether those
18 photographs which were reproduced by the House
19 Select Committee on Assassinations appear to
20 correspond to the photograph in your hand, noting
21 that MI 5 is a drawing and not a photograph. My
22 question is just whether this seems to be a general

1 correspondence.

2 A Yeah, I think--these two, I can't make
3 anything of these blow-ups. I really have great
4 difficulty with those.

5 Q With the blow-ups, you're referring to
6 Nos. MI 1 and MI 2?

7 A Yeah. I really can't make anything of
8 those.

9 Q Dr. Humes, are you able to identify what
10 you have described previously as an entrance wound
11 in the posterior skull of President Kennedy on
12 photographs in View 6?

13 A This is the same problem I had at the
14 committee hearings.

15 Q Referring to the House Select Committee on
16 Assassinations?

17 A Yeah. I had big difficulty trying to see
18 which was which among these things, between here
19 and here.

20 Q When you say "here and here," the first
21 one you were pointing to something that appears
22 roughly slightly below the ruler, and the second

1 "here" was referring to the object that is quite
2 near the bottom of the frame?

3 A Right. I mean, they threw these up on a
4 great big screen and said which is what, and I
5 really had difficulty. I couldn't be sure. I'm
6 disappointed. I was disappointed in that regard.
7 I still have trouble with it.

8 Q Are you able to identify on View 6 the
9 entrance wound?

10 A Not with certainty, I'm sorry to tell you.

11 Q Are you aware of where the House Select
12 Committee on Assassinations panel of experts
13 identified what they believed to be the entrance
14 wound?

15 A * No. No.

16 Q Do you see the gloved hand?

17 A Mm-hmm.

18 Q Are you able to identify whose arm that is
19 holding the President's head?

20 A No.

21 Q When that photograph was taken, was the
22 scalp being pulled forward, that is, towards the

1 eyes of the President, in order for that photograph
2 to be taken?

3 A It's possible. I'm not sure. It looks
4 like that's what's happening. The edge of the
5 defect is up there. The edge of the defect is
6 adjacent to where the fingers and thumb of the
7 person appear on the photograph.

8 Q Dr. Humes, I would like to show you a
9 document that's been marked as Exhibit MD 14, which
10 you previously have seen, and I'd like to show you
11 a portion of that document, on the bottom paragraph
12 on page 3, going to the top of page 4, and ask you
13 if that helps you orient the photograph.

14 A See, they're talking about the scalp shown
15 in the photograph, and I'm not sure which one it is
16 that they're referring to.

17 I suppose that's what they're talking
18 about there. I have to presume that's what they're
19 talking about.

20 Q When you say "they're talking about," do
21 you mean the House Select Committee--

22 A Yes.

1 Q --on Assassinations? And the point that
2 you're pointing to is the apparent spot that is
3 slightly below the top of the measuring device?

4 A Yes.

5 Q And based upon your recollection and
6 examination of the photos, is that where you now
7 would identify what you believe to be the entrance
8 wound in the skull?

9 A I cannot flat-footedly say that. I have
10 trouble with it. The head is turned toward one
11 side. I don't know. It's very difficult. Very
12 difficult. It's an educated guess, to be perfectly
13 honest.

14 Q For that marking that is towards the
15 bottom near the hairline, what is your best
16 understanding of what that designates?

17 A I don't have the foggiest idea. See,
18 what's important is where is the wound in the bone.
19 You can't tell that from these pictures.

20 Q What was your understanding of the
21 correlation, if any, between a puncture wound in
22 the scalp and the puncture wound in the bone?

1 A They're directly over align--directly
2 aligned.

3 Q So there was not a penetration of the
4 scalp with the bullet going along the cranium and
5 then going in at some--

6 A My impression was it went right through
7 from the site of the skin wound, when you looked at
8 the wound from the inside and matched them up with
9 the scalp wound.

10 Q Did you have any difficulty identifying
11 the scalp entry wound during the time of the
12 autopsy?

13 A No, I didn't at the time of the autopsy,
14 but the photographs I think create ambiguity. For
15 me they do, much to my displeasure and dismay. I
16 thought they would erase ambiguity rather than
17 create it.

18 Q Would you have expected the marking that
19 you took to be the entry wound in the scalp to have
20 been better represented in the photos than what you
21 were seeing--

22 A Yes, I would have hoped that it would have

1 been. Yes, sir.

2 Q I'd like to point out to you the flap that
3 appears to be above the right ear.

4 A Right.

5 Q And ask you if you can identify now what
6 that flap is.

7 A Not with certainty. Not with certainty.
8 It looks like the inner surface of the scalp, you
9 know, viewing here. And how it got to be in that
10 position, I'm not sure. The distances are hard to
11 judge, for me, from this. I don't know.

12 MR. GUNN: Steve, could we look at the
13 other photographs from this same series just to see
14 if there's anything more than can be shown? So 15,
15 16, 42, and 43.

16 For the record, Dr. Humes now has all the
17 photographs just identified above available for his
18 inspection.

19 THE WITNESS: In this particular one,
20 which is No. 43, this object down near the hairline
21 seems more obviously to be an artifact of some
22 kind. I don't know what it is. I have no idea

1 what it is. And this does seem to be the wound.

2 BY MR. GUNN:

3 Q When you say "this," you're referring to
4 the portion that is up near the--

5 A Near the top of the ruler, yeah.

6 Q Could you examine the black and white
7 photos and see if they help?

8 A They don't help me. You can't even see
9 any wound in the upper area of this.

10 Q When you say that, you're referring to
11 photograph number--

12 A Whatever this is--15.

13 Q And photograph 16?

14 A This is 16. This looks like dura now,
15 this piece of material.

16 Q You're referring to the flap now that's
17 above the ear?

18 A Yeah, it does look like dura, but I'm not
19 absolutely certain. And the wound is really--I
20 don't know. Not discernible, I guess.

21 Q I asked you a similar question with
22 another view, but I'd just like to try the same

1 question again. Looking at the posterior skull
2 here, the portion that is below the ear--so if we
3 were to draw a line from between the top of the ear
4 and the top of the ruler down, is it your
5 understanding that the skull behind that scalp
6 would be intact?

7 A Reasonably intact.

8 Q We'll go to the seventh view, which is
9 described as "missile wound of entrance in
10 posterior skull, following reflection of scalp,"
11 Nos. 17, 18, 44, and 45.

12 Again, the descriptions that I am reading
13 come from the numbering system supplied by the
14 November 10, 1966, inspection.

15 Could you turn these so they're all the
16 same? Just so the rulers are in the same relative
17 position.

18 The first question for you, Dr. Humes, is:
19 Can you identify these photographs as being true
20 and authentic photographs taken at the autopsy of
21 President Kennedy?

22 A They certainly appear to be as such.

1 Q The first question for you would be
2 whether you can orient those photos so as to
3 describe what is being represented in the
4 photographs.

5 A Boy, it's difficult.

6 I can't. I just can't put them together.

7 I can't tell you what--

8 Q Can you identify whether that is even
9 posterior or frontal or parietal?

10 A Not with any certainty, no. Very
11 disappointed.

12 No, I can't.

13 Q Previously in your deposition today, you
14 said, if I recall correctly, that you had
15 photographs taken with the scalp reflected that
16 showed the entrance wound. Is that correct?

17 A I thought that I had, yes.

18 Q Is it your understanding that these are
19 photographs that--

20 A They could well be, but they're
21 disappointingly confusing to me.

22 Q I'd like to show you the description that

1 you made in 1967 and have you review that and see
2 if that helps.

3 A Now, this is the wound of exit that you're
4 talking about. This is certainly not the wound of
5 exit that we're talking about here.

6 Q I'm referring to what the testimony was
7 that you said earlier today when I said entrance.

8 A I'm sorry, sir. You've lost me.

9 Q Okay. In my last question, I was
10 referring to your prior testimony today where you
11 referred to the scalp being reflected and
12 photographs being taken of the entry wound in the
13 posterior of the skull.

14 A Yeah.

15 Q Okay. Now we're on a different question,
16 and I'm showing you a description from another
17 thing to see if this helps at all.

18 A No. It doesn't help at all. This is the
19 wound of exit from the skull, the big gaping hole
20 in the right side of the temporo-parietal area.
21 This doesn't help me. I don't know how it could be
22 expected to help me.

1 Q In the seventh view of the photographs,
2 what you're looking at today, do you see any
3 notches in any of the bones that could be
4 identified either a wound of entrance or exit?

5 A There's what appears to be a notch in a
6 major portion of bone here centrally located, but
7 I'm not at all sure about it. I don't know where
8 it is or--I can't get oriented at all. I just
9 can't. It shows up in the black and white thing
10 here.

11 Q Was any photograph taken during the
12 autopsy with scalp reflected of the frontal bone or
13 the parietal bone?

14 A Certainly not specifically of the frontal
15 bone, but, yes, I presume of the parietal bone. I
16 presume there was.

17 Q What I want to see if we can get clear, as
18 best we possibly can, is when--is what photographs
19 were taken when the scalp was reflected--

20 A Sir, you're asking me to tell you
21 something that happened too long ago for me to be
22 able to respond intelligently.

1 Q What I would like to see if we can do the
2 best that we can with is to understand whether
3 there was a photograph taken with the scalp
4 reflected off the posterior portion of the head.
5 Now, I understood from the testimony earlier today
6 that you had thought that there was such a
7 photograph taken. Whether the photograph you're
8 now looking at or not, whether that is that
9 photograph or not isn't the question, but whether
10 there was such a photograph taken.

11 A I cannot recall specifically.

12 Q Dr. Humes, I'd like to show you a document
13 marked Exhibit 13, which appears to be a November
14 1, 1966, inventory which has your signature on it.
15 Is that correct?

16 A Right.

17 Q And this inventory was prepared
18 approximately three years after the autopsy; is
19 that correct?

20 A Yes. That was one of the problems. Yes.

21 Q Could you identify for me roughly the
22 procedure that you followed in preparing the

1 document that's now marked Exhibit 13? Just if you
2 could explain the circumstances of how you came to
3 prepare the document.

4 A We came--we were told that it was
5 necessary to have the photographs identified. We
6 proceeded to the old building downtown, Archives
7 building, where we met with Mr. Rhoads, I believe
8 was the Archivist. And J and I--Pierre wasn't
9 there, was he?--Jack Ebersole--no, Pierre was not
10 there. J and I and Jack Ebersole and John
11 Stringer, who actually took all the photographs,
12 and they were brought out to us one at a time, and
13 we wrote a description of what we thought we were
14 seeing.

15 Q Okay. Could you look at the description
16 that you created in 1966 that corresponds with the
17 photos that we're looking at now?

18 A 44, for instance, this one.

19 Q Does that document reference No. 17? That
20 would be to one of the black and white photos.
21 Does your description from 1966, three years after
22 the autopsy, help you today identify or orient the

1 photographs in View 7?

2 A Well, now, I guess now that I look at it,
3 perhaps it does. The black and white one, down
4 here opposite the edge of the rule, I presume that
5 is what we're talking about right there.

6 Q Okay. You're referring to something that
7 is very near the point of the--

8 A Right, right there.

9 Q --ruler where the centimeter marks are?

10 A Right. It's not anywhere near as clear
11 as I would have hoped it were to be. But that I
12 have to presume is what we're talking about right
13 there, because that's about the size of the
14 location, as I can see where it is. The scalp is
15 reflected downward, as you can see here.

16 Q So would it be fair to say that--

17 A This here again would be it, you see;
18 there, there, and--you lose it here with all this
19 business. I don't know. I have trouble with this.
20 I can't really recognize it there.

21 Q So this is a portion that, if the ruler
22 were on the bottom of the--if the ruler were placed

1 at the bottom of the drawing, this would be
2 slightly above the corner of the uppermost part of
3 the ruler?

4 A That's my belief, yes, sir.

5 Q And that is what you believe to be, as
6 best you can tell now--

7 A Yes.

8 Q --to have been the entrance wound--

9 A Yes, sir.

10 Q --in the posterior skull?

11 A Yes, sir. Without major conviction, but I
12 believe that's the case.

13 Q Dr. Humes, I'd like to show you part of
14 your testimony to the Warren Commission,
15 particularly on pages 352 and 353, and I'd like to
16 ask if this testimony that you provided helps
17 refresh your recollection as to whether there were
18 any photographs taken of the posterior skull with
19 the scalp reflected. So at the bottom of pages 32-
20 -excuse me, 352, to the top of page 353.

21 A He goes on to a motion picture here.

22 Q Pardon?

1 A He goes on to a motion picture.

2 Q You're referring to the testimony.

3 A Yeah, I see it, but it says photographs
4 illustrating the phenomenon from both the external
5 surface of the skull and the internal surface were
6 prepared. We conclude that the large space on the
7 upper right side--and so forth. I don't--I have
8 not yet been shown what I would construe to be the
9 photograph of the wound of entrance from the
10 internal surface.

11 Q And at least it was your understanding as
12 of March 1964 that a photograph of that sort had
13 been taken?

14 A Yes. Yes.

15 Q Let's move to the bottom of the final
16 paragraph of Exhibit 13, which is your report of
17 November 1, 1966, signed November 10th.

18 A May I say what it says? We thought that
19 we hadn't seen them all.

20 Q As of November 1966, were you of the
21 opinion that there were any photographs of the
22 autopsy that had been taken in addition to those

1 that you were able to see at the Archives?

2 A The only one I recall specifically in that
3 connection is the one I spoke to you about later,
4 was the interior of the thorax. I thought we had
5 seen all the others. Maybe we hadn't. I don't
6 know. You got to remember, this was three years
7 after the fact. That's part of the problem with
8 all of this, temporal distortion of memory and what
9 have you, accentuated when you get 35 years away.

10 Q I'd like to show you another statement
11 from your Warren Commission testimony on page 360.
12 This is from Exhibit MD 11. Dr. Humes, could you
13 read the portion from the point where Mr. Dulles is
14 saying, "Just one other question," and then your
15 answer to that?

16 A Yeah, sure.

17 Q While you're reading it to yourself, I
18 will read it for the record.

19 "Mr. Dulles: Just one other question. Am
20 I correct in assuming from what you have said that
21 this wound is entirely inconsistent with a wound
22 that might have been administered if the shot were

1 fired from in front or the side of the President?

2 It had to be fired from behind the President?"

3 "Commander Humes: Scientifically, sir, it
4 is impossible for it to have been fired from other
5 than behind or to have exited from other than
6 behind."

7 A I don't know where that phrase got in
8 there, "to have exited from other than behind,"
9 other than--it's a peculiar use of words, that it
10 came in from behind and exited from behind. I
11 presume going forward. I don't--that's kind of a
12 bad sentence. I don't know how to interpret that.

13 Q Did you mean--

14 A There was no exit from behind as far as
15 I'm concerned, period.

16 Q So anyone who would--let me rephrase this.
17 Would it be fair to say that when you intended to
18 say to the Warren Commission would not have been
19 that the exit wound also came from the posterior
20 portion of the President?

21 A Yeah. The exit wound did not--was not in
22 the posterior portion of the head. I don't know

1 how that verbiage got in there. A bad statement if
2 I actually made it.

3 Am I led to believe that we have not found
4 the photograph from inside of the posterior portion
5 of the skull?

6 Q You have now seen today all of the
7 photographs of the skull we had.

8 A I don't know how to explain it, because we
9 didn't--I don't think we described in anywhere
10 here that photograph. I'd have to go through the
11 whole list of the photographs to see, but my
12 recollection is that we took it from both the
13 outside and from the inside after the brain was
14 removed.

15 Q When you were referring to that photograph
16 in your previous answer, were you referring to the
17 photographs from View 7 that are in front of you
18 now? You can hold off on the answer. Maybe if you
19 can--if you could just--

20 A Well, these are quite obviously from the
21 outside of the skull. They're not from the inside.
22 That's perfectly obvious. So I don't see one from

1 the inside of the posterior cranial fossa where the
2 defect was. And I'm disappointed because I thought
3 we had such a photograph.

4 Q Okay. Did you go back to the Archives in
5 January of 1967--this would be a couple of months
6 later--and draft another statement or description
7 of the autopsy materials?

8 A If you've got such a statement, I presume
9 we did. I don't remember the details of it.

10 Q I'd like to show this Exhibit No. 14. Do
11 you recall that document?

12 A I recall it, but I don't recall what
13 caused it to be produced. I do not recall what
14 caused this to be produced.

15 Q Do you see who the people are who signed
16 Exhibit 14?

17 A Yes.

18 Q Do you see that Dr. Finck is involved with
19 that?

20 A Yes.

21 Q Does that help refresh your recollection
22 at all as to the circumstances for signing that

1 document or preparing that document?

2 A No. Doesn't help a bit.

3 Q Do you have any idea who wrote Exhibit 14?

4 A No. I don't think so.

5 I don't know who wrote this, and reading
6 it, it doesn't seem like I wrote it, just because
7 of the phraseology and some of the comments. I
8 don't know who wrote it.

9 Q Do you recall what the purpose was for
10 your going to the Archives in November of 1966 to
11 prepare the inventory? What circumstance led to
12 that?

13 A Well, the photographs were there. Nobody
14 knew exactly what they depicted, so they asked us
15 to attempt to resolve that problem, and that's what
16 we tried to do.

17 Q And do you know whether what is now
18 Exhibit 14 is continuing in that process at all?

19 A It would appear that that was the purpose.
20 But I have no--as I say, I don't recall anything
21 about it. I really don't. I don't recall it.
22 Other than--other than the earlier, longer report

1 that takes the photographs number by number--

2 Q That's Exhibit 13?

3 A Yeah. It didn't really draw any
4 conclusions. That was strictly a narration and a--

5 Q Catalogue?

6 A A catalogue of the pictures. And I would
7 guess then we were asked to try and put it together
8 in a form that made it more expository. That's
9 what I have to presume is what we did.

10 Q But as of today, you're not able to
11 recollect what the procedure was for that document
12 having been created?

13 A I certainly am not. The statement I just
14 made would have to be my presumption of what
15 occurred, because as you know, this is just a
16 catalogue. It comes to no conclusion. It doesn't
17 attempt to correlate these pictures with the
18 autopsy, really.

19 Q And by that, you're referring to Exhibit
20 13?

21 A 13, yes, sir. So to your just previous
22 question, was it part of the same process, I would

1 have to say yes, it must have been.

2 Q Let me try one last question for View 7,
3 the four photographs that you have in front of you.
4 You have suggested that you think that there is
5 some evidence or some possibility that photographs
6 depict an entrance wound. Is there a possibility
7 that those four photographs portray the exit wound?

8 A I would think that's possible that this
9 large notched thing here may be part of the exit
10 wound of that missile. It could be. But I'm not
11 sure. I'd have to go back--because after we got
12 the pieces of bone from Dallas, we attempted to--if
13 this is what I'm saying it may be, we estimated
14 what the actual margin of that was with a little
15 ^{*}gimme factor because we didn't have the whole. But
16 we thought we had more of--if this is the exit
17 wound, more of the circumference of it, because it
18 seems--this wound seems to be somewhat--if that is
19 a wound, I don't know. It seems to be beveled from
20 the outside.

21 Q If View 7, in fact, shows the exit wound,
22 would it then be fair to say that you now would

1 recall three photos that you believe were taken
2 that are not now in the collection, one of them
3 being a photograph of the posterior skull entry
4 wound with the scalp reflect--

5 A At least not recognizable as such.

6 Q Sure.

7 A It may be here, but not, to me,
8 recognizable as such.

9 Q The second one being the interior of the
10 skull--

11 A Yeah. And that should have been sharp and
12 clear because there was no blood by that time, you
13 see. The brain had been removed, and it was a
14 through-and-through hole, and I had every
15 anticipation that you had no problem--you could
16 tell the contour of the internal--you know, the
17 internal portion of the posterior fossa, a child
18 could recognize that. And we don't have that to
19 see. And the chest.

20 Q The chest being the third?

21 A Yes.

22 Q Okay. Thank you.

1 Could we go to the eighth view, which is
2 the basilar view of the brain?

3 MR. GUNN: Off the record.

4 [Discussion off the record.]

5 THE WITNESS: What George Burkley did with
6 that brain is the mystery of the century. And why
7 I so easily acceded to his wishes, I don't know,
8 other than he's talking about Bobby and the family
9 and what they want.

10 BY MR. GUNN:

11 Q The next view is the eighth called in the
12 1966 inventory the "basilar view of brain," and
13 it's color photos Nos. 46, 47, 48, and 49.

14 A Okay.

15 Q Dr. Humes, can you identify those
16 photographs as photographs of the brain of
17 President Kennedy?

18 A Yes.

19 Q And previously you spoke about this issue,
20 but just to clarify it at this point: Were these
21 photographs taken within a few days of the autopsy?

22 A That's correct.

1 Q And these were after they had been
2 thoroughly set in formalin; is that correct?

3 A That's correct.

4 Q Can you describe briefly what the
5 photographs portray?

6 A Well, really the black one is somewhat--
7 excuse me, the black and white one is somewhat more
8 graphic and easy to describe because it shows you a
9 view of the brain from above, with the cerebellum
10 below, and the more or less intact left cerebral
11 hemisphere.

12 Q I'm sorry. If I could interrupt you for a
13 minute, the one that you're referring to now is a
14 superior view of the brain, and I'd just like to
15 see if we can get the--

16 A Right. A superior view of the brain
17 looking down on the cerebellum, which is below and
18 behind the cerebrum.

19 Q The numbers that I gave identified this as
20 the basilar which--I just want to make sure that
21 we're all on the same page here for the record.

22 A This can't be basilar.

1 Q That's correct. I didn't know this one
2 was going to be handed to you.

3 A You want me to do something different?

4 Q Sure. If you can just look at the basilar
5 view of the brain, if you could describe what that
6 view shows. That is View No. 8 corresponding to
7 color photographs 46, 47, 48, and 49.

8 A Boy, I have trouble with this. I don't
9 know which end is up.

10 I don't know what happened here. Looking
11 at this photograph, which is labeled No. 46, the
12 structure which is on the right side of the brain
13 appears to be intact, the cerebrum intact. And
14 that's not right, because it was not. And the
15 structure, which is all distorted--let me see.
16 Well, well, I guess this--this is the left side of
17 the brain more or less intact. This I guess is the
18 brain stem down here somewhere, but I can't make it
19 out.

20 Q Is the cerebellum visible in the basilar
21 view?

22 A Well, yeah. Here's the one that I now

1 take to be the right lobe of the cerebellum is in
2 view and discernible. The structures in the
3 picture to the right of that were very difficult
4 to--there's more cerebellum. Yeah, this is a--this
5 is the cerebellum and brain stem in through here.

6 Q In the photograph that you're looking at
7 of the basilar view, is the left cerebellum
8 disrupted?

9 A No--well, I guess so. Yeah, probably.

10 Q It's on the right of the photograph that
11 you're looking at, but that would be--

12 A Yeah, that would be the left cerebellum.
13 It seems to be to some extent disrupted.

14 Q Do you know how the left cerebellum came
15 to be disrupted?

16 A I would have to presume by the explosive
17 force of the missile as it entered near there.
18 There seems to be a laceration in the mid-brain
19 here, see?

20 Q Can you point out where the laceration in
21 the mid-brain is?

22 A Right there.

1 Q Is the mid-brain above or below the
2 cerebral cortex?

3 A Oh, below the cerebral cortex.

4 Q Was the--

5 A This is basically probably the lesion that
6 was fatal.

7 Q The one to the mid-brain?

8 A Yes. Presumably.

9 Q I'd like to show you page 4 of the autopsy
10 protocol, Exhibit 3, and ask you to read to
11 yourself the first full paragraph.

12 A Yeah.

13 Q Does that paragraph, which I'll read for
14 the record in just a moment, accurately describe
15 the ~~injury~~ to the brain? Let me read it for the
16 record; then you can answer the question. "Clearly
17 visible in the above-described large skull defect
18 and exuding from it is lacerated brain tissue,
19 which on close inspection proves to represent the
20 major portion of the right cerebral hemisphere. At
21 this point it is noted that the falx cerebri is
22 extensively lacerated with disruption of the

1 superior sagittal sinus."

2 A There might be one word that you changed
3 in there. Instead of "the major" to "a major
4 portion" of the right lobe of the brain.

5 Q Now I'd like to show you Exhibit No. 4,
6 which is the supplementary report, and ask you to
7 read the first paragraph of the supplementary
8 report which refers to injury to the brain.

9 A Yeah, I think it rather accurately
10 describes what you see here.

11 Q Okay. Now, there is reference in that
12 paragraph to a longitudinal laceration of the right
13 hemisphere, and it then goes on to say that the
14 base of the laceration is situated approximately
15 4.5 centimeters below the vertex. Is that
16 laceration visible on the photographs of the
17 basilar view of the brain?

18 A Well, not very clearly. Not very clearly.

19 Q Would you expect--

20 A I presume it's in through here.

21 Q Would you expect that laceration to be
22 visible on the superior view of the brain?

1 A I don't know. I can't tell from this.

2 MR. GUNN: Could we have the photographs
3 of the superior view, colors 50, 51, and 52?

4 THE WITNESS: Okay.

5 BY MR. GUNN:

6 Q Is that laceration which is 4.5
7 centimeters below the vertex visible on the
8 photograph of the superior view of the brain?

9 A You know, laceration is a bad way to
10 describe it. It's a big disruption. I guess we
11 called it a laceration because that seemed like as
12 good a word as any. But it significantly destroys
13 much of that right cerebral hemisphere.

14 Q So I'm clear, is there a laceration that
15 comes down, that goes from what you're describing
16 as back to front that is 4.5 centimeters below the
17 top of the skull and a separate laceration that
18 goes down near the mid-brain?

19 A Yeah, I guess so.

20 Q Do those two lacerations connect to each
21 other?

22 A I don't know. You can't tell from here.

1 Q "From here," you're referring to this--

2 A From the photographs.

3 Q Dr. Humes, did you take a section from the
4 right cerebellar cortex?

5 A According to the supplementary report, I
6 did.

7 Q Why did you take a section from the right
8 cerebellar cortex?

9 A Just to be more all inclusive. For no
10 particular reason.

11 Q Did you take a section from the left
12 cerebellar cortex?

13 A It doesn't appear that I did.

14 Q Is there a reason for not taking one from
15 the left cerebellar cortex?

16 A No. No. If there is, I certainly can't
17 recall what it would have been.

18 Q When you removed the brain, which part of
19 the brain did you cut in order to remove it?

20 A The brain stem.

21 Q Was the brain--were you able to ascertain
22 whether the brain stem had received any damage

1 prior to the time that you made the incision?

2 A It was my impression that it had, yes.

3 Q Was the brain stem already disconnected at
4 the time that you--

5 A No, it was not disconnected.

6 Q How was it that you had the impression
7 that it was--that it had received some kind of
8 laceration or injury?

9 A Well, one of these photographs shows you,
10 as I tried to point out earlier, the one that was
11 here a few minutes ago--

12 Q The basilar view?

13 A Yeah, the basilar view shows this
14 disrupted-looking area right there. That's the
15 brain stem.

16 Q Looking at the basilar view, are you able
17 to ascertain whether either the left or the right
18 cerebellum has been disrupted? We touched on this
19 issue before, but I just wanted to return to that.

20 A In this photograph, it would appear the
21 right cerebellum has been partially disrupted, yes.

22 Q But not the left cerebellum?

1 A Not the left. The left seems pretty
2 intact.

3 Q From the superior view of the brain, are
4 you able to identify any disruption of either left
5 or right hemisphere of the cerebellum?

6 A They both look pretty good from above.
7 You can see both sides. That shows you why
8 pictures don't always tell the whole story.

9 Q What this seems to be pointing to is two
10 separate lacerations of the brain, one going
11 through the right cerebrum and the other one high
12 along the--or 4.5 centimeters from the vertex, the
13 other one going low and hitting the brain stem. Is
14 that--

15 A I object to the two separate. I think
16 they're all extensions of one another.

17 Q So it is one projectile going through
18 that's causing--

19 A Partially the projectile and partially the
20 explosive force of the missile, and I can't
21 evaluate with any certainty which is which.

22 If you ever saw a high-speed photograph of

1 a missile going through a block of wax--many times
2 people use this to demonstrate speeds of missiles--
3 you'd see that the explosive force is much larger
4 and destructive, really, than the single path--the
5 path of the bullet is like an ice pick, relatively
6 narrow in its effect, but it's the force that's
7 expended as it goes through that is much more
8 dangerous and disruptive.

9 Q Was there a non-disrupted portion of the
10 brain between the portion that was 4.5 centimeters
11 below the vertex and the portion that goes through
12 the brain stem? Or was it all--

13 A I think there's very little of the right
14 cerebral hemisphere that was not in some way
15 damaged by this. Very little. Maybe the tip of
16 the temporal lobe, possibly, was not particularly
17 involved, but as you can see from the photographs,
18 most of the right cerebral was very seriously
19 injured.

20 Q Other than the left cerebellum, did you
21 notice any disruption of the left hemisphere of the
22 brain?

1 A No. But there was some contusion, I
2 think, over the surface. There's some suggestion
3 that the brain bounced off the interior of the
4 skull, and there was some bruising like thing.
5 Contrecoup injury, they call it.

6 Q All right. If we can go to the X-rays.

7 MR. GUNN: Off the record.

8 [Discussion off the record.]

9 BY MR. GUNN:

10 Q Dr. Humes, you're now looking at X-ray 5-B
11 No. 1. I'd like to ask you whether you have
12 previously seen that X-ray.

13 A I probably have. It's antero-posterior
14 view of the skull and the jaw. It shows the large
15 bony defect in the right side of the skull, and
16 some white material, which I presume may be
17 metallic fragments, in the right side of the
18 photograph.

19 Q The left side of the photograph but the
20 right side of the skull?

21 A Right side of the skull, yeah.

22 Q And that appears to be, at least in

1 height, in the orbital range?

2 A Yes, somewhere. Yeah, I would guess.

3 Q Did you notice that what at least appears
4 to be a radio-opaque fragment during the autopsy?

5 A Well, I told you we received one--we
6 retrieved one or two, and--of course, you get
7 distortion in the X-ray as far as size goes. The
8 ones we retrieved I didn't think were of the same
9 size as this would lead you to believe.

10 Q Did you think they were larger or smaller?

11 A Smaller. Smaller, considerably smaller.
12 I mean, these other little things would be about
13 the size of what--I'm not sure what that is or
14 whether that's a defect. I'm not enough of a
15 radiologist to be able to tell you. But I don't
16 remember retrieving anything of that size.

17 Q Well, that was going to be a question,
18 whether you had identified that as a possible
19 fragment and then removed it.

20 A Truthfully, I don't remember anything that
21 size when I looked at these films. They all were
22 more of the size of these others.

1 Q What we're referring to is a fragment that
2 appears to be semicircular.

3 A Yeah. I don't know.

4 Q Looking at that X-ray, 5-B No. 1, could
5 you correlate any damage that you see on the right
6 hemisphere of the skull with the photograph that's
7 to your left now, which is color photograph--

8 A Oh, sure. The skull defect is obvious.
9 Now, not the brain. You can't tell much about the
10 brain from here. The brain doesn't--in plain films
11 it doesn't, you know--it's not well imaged at all.

12 Q To the lay eye--and I mean this to not
13 have any presumption of being accurate--there is a
14 large gap in the top right quadrant of the skull.
15 That's on the left side of the X-ray, the right
16 quadrant.

17 A Right.

18 Q What does that signify, as best you
19 recall, having been present at the autopsy?

20 A That's the bone that was removed by the
21 path of the missile.

22 Q Was the frontal bone present on--was the

1 frontal bone still intact on the President?

2 A It was intact, yes. I can't even make it
3 out here, really.

4 Q You can't see it there, but it was
5 present?

6 A No. It was present, yes, sir.

7 Q Could we look at the second X-ray, please?
8 This will be a right lateral view of the skull, 5-B
9 No. 2. Dr. Humes, can you identify 5-B No. 2 as
10 being an autopsy X-ray taken on November 22, 1963?

11 A I guess so. That's really--it's got some
12 very--it's a peculiar exposure. These are the
13 spines of the vertebrae here, of course, and these
14 are the bodies of the vertebrae. And these lines
15 are some of the fractures that were present in the
16 skull.

17 Q You're referring to the lines that are in
18 the top of the parietal bone--

19 A Right.

20 Q --and into the occipital bone; would that
21 be correct?

22 A Right. Those were the fracture lines, and

1 it's difficult--I don't know why this is so radio-
2 opaque, this whole area.

3 Q You're referring to the right frontal
4 area.

5 A What seems to be the frontal portion of
6 it. I don't understand why that is. You'd have to
7 have some radiologist tell me about that. I can't
8 make that out.

9 Q I'd like you to see if you could identify
10 where you understand the entrance wound to have
11 been on the skull, looking at this lateral X-ray.

12 A Well, back in this area.

13 Q You're referring to the very low back of
14 the cranium--

15 A Cranium.

16 Q --very near to the vertebra; is that
17 correct?

18 A Well, fairly near, yeah. You can't see it
19 here. I can't see it.

20 Q Do you see any fragments, stellate or
21 otherwise, that would be consistent with an entry
22 wound in that point?

1 A Well, there's no fragments there. There's
2 fragments or what appear to be fragments up higher
3 towards the vertex in this picture. Maybe one
4 right in the middle of the picture. And this may
5 be--do you see where this increased density is
6 here? There may be two pieces--it may be
7 overlapped. This piece of bone may overlap that
8 one so it looks more dense there.

9 Q Okay.

10 A That's about as much as I can make of
11 that.

12 Q What I'd like you to do is look at Exhibit
13 No. 73, which is a drawing from Grant's Anatomy,
14 and see if you could make a marking on Grant's
15 Anatomy--these are both laterals with the posterior
16 portion of the cranium on the left of the drawings.
17 If you could make a mark with the pen at
18 approximately where you understand the entry wound
19 to have been?

20 A No, because it would be down here and you
21 wouldn't be able to see it on this lateral view, I
22 don't think.

1 Q You're referring to the Grant's Anatomy--

2 A Whatever it is.

3 Q --drawing?

4 A Yeah. See, but it was not that far from
5 the midline, and this is really somewhat lateral to
6 the midline, this depiction. But, in general, it
7 would be back in this area some place.

8 Q You're making a blue marking
9 approximately--

10 A Right.

11 Q --where the entry wound was. Of course,
12 that's not showing it in relationship to the
13 midline.

14 A No, it does not show it. No.

15 * I don't understand this great big void
16 there. I don't know what that's all about.

17 MR. GUNN: Excuse me for a moment.

18 [Pause.]

19 BY MR. GUNN:

20 Q Dr. Humes, I had another question for you
21 about the lateral X-ray.

22 A Mm-hmm.

1 Q And that is whether you can identify the
2 particles that you made reference to before and
3 where they appear in this photograph.

4 A Well, you see, there's nothing in this
5 projection that appears to be of the size of the
6 one that appeared to be above and behind the eye on
7 the other one. But that could be positional or the
8 other thing is an artifact. I don't know what.
9 But here, above where I talk about this double
10 density that you see here, there's a fragment.
11 There seems to be one up here in the frontal region
12 and a couple further up by the vertex.

13 Q Do those metal fragments--or do those
14 radio-opaque objects help you in any way identify
15 entrance or exit wounds?

16 A No. No, they really don't.

17 Q Is there any relationship or correlation
18 between those metal fragments and the bullet wound?

19 A Not that I can make out at all, no. They
20 seem to be random.

21 Q Okay. Dr. Humes, I'd like to show you
22 Exhibit 3, which, again, for the record, is the

1 autopsy protocol, and ask you if you could read the
2 paragraph on page 4 that I'm referring to, the
3 paragraph that starts with "Received."

4 A This would reinforce my opinion that that
5 one photograph was part of the margin of the exit
6 wound.

7 Q You're referring to View 7 that showed the
8 inside of the cranium? Is that--

9 A Well, it didn't really--I don't know what
10 it showed, my problem is, but in one of the bone
11 fragments there was a semicircular defect that was
12 not complete, only part of it. And then when we
13 got these fragments, at one margin of it there's
14 something that seemed to match up with that
15 fragment that was still in the skull. My memory's
16 pretty good. I said we had three. That's what we
17 have, I guess.

18 I described several metallic fragments
19 along the line corresponding to a line joining the
20 occipital wound with the right supraorbital ridge.

21 Q The above-described small occipital wound
22 and the right supraorbital ridge.

1 A Two small irregularly-shaped fragments of
2 metal are recovered. They measure 7 by 2 and 3 by
3 1. Well, that large one that you saw in that first
4 AP view of the skull could be the 7-by-2 millimeter
5 one that we handed over to the FBI.

6 Q Could you point out for me on X-ray No. 2
7 where the minute particles of metal in the bone are
8 in relationship to the small occipital wound and
9 the right supraorbital ridge?

10 A Well, they don't relate at all in this
11 picture, as far as I'm concerned.

12 Q "This picture" being X-ray No. 2?

13 A Yeah. They don't. I don't know where I
14 got that, but there's--the occipital wound would
15 never be up that high anywhere up there. There's
16 nothing up there.

17 Q You're pointing to the top left portion of
18 the brain slightly above--

19 A Well, I don't know whether it's left or
20 right. You can't tell that from this. Don't say
21 that because there's no way of telling that it's
22 left. An X-ray doesn't tell you whether it's left

1 or right. These fragments here.

2 Q Do you see any fragments that correspond
3 with a small occipital wound?

4 A No.

5 Q Do you recall having seen an X-ray
6 previously that had fragments corresponding to a
7 small occipital wound?

8 A Well, I reported that I did, so I must
9 have. But I don't see it now.

10 Q Did you have X-rays available for your use
11 while you were preparing the autopsy protocol?

12 A No.

13 Q Are you reasonable certain that there was
14 an X-ray that showed metallic fragments going from
15 a small occipital wound?

16 A All I know is I wrote it down. I didn't
17 write it down out of whole cloth. I wrote down
18 what I saw.

19 Q Does that raise any question in your mind
20 about the authenticity of the X-ray that you're
21 looking at now in terms of being an X-ray of
22 President Kennedy?

1 A Well, there's aspects of it I don't
2 understand. I don't understand this big void up--
3 maybe a radiologist could explain it. I don't know
4 what this big--

5 Q You're referring to--

6 A --non-opaque area that takes up half of
7 the skull here, I don't understand that.

8 Q Do you remember seeing that on the night
9 of the autopsy?

10 A No, I don't. That doesn't mean it wasn't
11 there, but I don't remember it.

12 MR. GUNN: Okay. Off the record for a
13 minute.

14 [Discussion off the record.]

15 * BY MR. GUNN:

16 Q During the course of the deposition, we
17 have talked three photographs that you had had some
18 understanding existed and that you did not see here
19 today. I'd like to ask you a question about
20 another possible photograph or X-ray to see if you
21 have any recollection of it.

22 Do you recall any photograph or X-ray that

1 was taken with a probe inserted into the posterior
2 thorax?

3 A No, absolutely not. I do not have a
4 recollection of such.

5 Q Do you recall any X-rays that were taken
6 that would have the extremities, including the
7 hands and feet?

8 A Yes, we had them. I thought we did, at
9 least. Or maybe--whether we went as far as the
10 feet and hands--we simply went down the arms.
11 Whether or not the hands and feet were there or
12 not, I can't remember.

13 Q Why did you take X-rays of the arms?

14 A Because as I mentioned earlier, missiles
15 that enter one portion of the body have a very
16 strange proclivity of going to the most unexpected
17 locations, and that's why we did that, to be sure
18 that there wasn't such a missile any place.

19 Q Are you familiar with the term "whole-body
20 radiographic survey"?

21 A Well, I can conjure up what it means. I
22 don't--it's not a phrase that I would frequently

1 use.

2 Q Is there a term for understanding in
3 radiography that would refer to an X-ray of the
4 entire body?

5 A I would guess that would be it, yeah.

6 Q And do you remember something of that sort
7 having been ordered by Dr. Finck on the night of
8 the autopsy?

9 A Truthfully, I don't know. Pierre was
10 really laid back through the whole thing, and I
11 can't recall him really ordering anything. Maybe
12 he did. But 99 percent of any kind of orders that
13 were given, I gave. And I don't know. Maybe
14 Pierre did make such a--I wanted to do that kind of
15 thing for the reason I already gave you, with or
16 without Pierre. And I don't know whether he
17 commented about it or was the one that actually
18 told Jack that's what we wanted. I don't know. I
19 don't remember that.

20 Q When you're referring to Jack, that's Jack
21 Ebersole?

22 A Jack Ebersole, right. He's no longer here

1 to defend himself, unfortunately.

2 Q When did you first meet Arlen Specter?

3 A That's a good question.

4 Q I hope that's not my first good question.

5 A Shortly after the Warren Commission was
6 established, whenever that was. It happened fairly
7 quickly. President Johnson was anxious to have
8 this whole matter, obviously, investigated. And I
9 truthfully can't recall exactly when it was.

10 Q Did you meet him at any point before the
11 Warren Commission was established?

12 A Oh, yes--oh, before--

13 Q Before the Warren--

14 A Oh, no. I'd never met him before. No.

15 Q So your meeting with him was entirely in
16 conjunction with the Warren Commission?

17 A Exactly.

18 Q Approximately how many times did you meet
19 with him during the time that the Warren Commission
20 was in existence?

21 A Oh, Lord, several times, and for different
22 purposes. We went to view the Zapruder film,

1 Zapruder, the amateur photographer who made this
2 famous movie. We went with him to look at the
3 President's clothing. These were all in that
4 downtown Archives building. We met with him to
5 discuss in the absence of the photographs and the
6 X-rays how we were going to present our materials
7 when I decided to employ one of our medical
8 illustrators, a young sailor who was, I thought,
9 quite capable, and he, acting under my direction,
10 performed pictures which have been published, I
11 think in the Warren Commission.

12 Q That's Mr. Rydberg?

13 A Yeah, right. Rydberg. He later went to--
14 went on as a medical illustrator at Chapel Hill at
15 the University of North Carolina. I think now he's
16 down in Texas. He decided to change careers and
17 become an EMT, of all things. I was very surprised
18 at that.

19 So we met to discuss--not how this was
20 going to be depicted, but would that be an
21 appropriate device to use in the absence of the
22 photographs and X-rays.

1 Q When you say several times, can you give
2 me a very rough estimate of whether we're talking
3 in the area of three to four or eight to ten?

4 A I would say more likely in the eight to
5 ten range. Again, that's really off the top of my
6 head.

7 Q How many times, if you recall, did you
8 meet with Mr. Specter prior to the time you gave
9 your testimony to the Warren Commission?

10 A All the meetings I ever had with him were
11 in that time frame. So I would say that many
12 times, whatever I told you, about eight. Don't
13 hold me to that number because I couldn't swear to
14 that at all.

15 Q That's fine. Did you not meet with him at
16 all after the testimony?

17 A No, other than socially quite a while
18 later when he was by now the district attorney in
19 Philadelphia, and we didn't even discuss the Warren
20 Commission or any aspect of it. We seemed to
21 develop a cordial relationship when we were doing
22 this thing. I haven't talked to him in recent

1 years.

2 Q During the time that you were preparing
3 for the testimony of the Warren Commission, did you
4 ask to be shown the photographs?

5 A No, because I had already stated that I
6 didn't want them to become public information, so,
7 therefore, I never asked for them.

8 Q Did Mr. Specter--I keep wanting to say
9 "Senator Specter." Did Mr. Specter ever suggest to
10 you that he thought it would be appropriate for him
11 to examine the autopsy photos?

12 A I don't recall that he ever did, no.

13 Q Were you ever pressured or encouraged in
14 any way to have the drawings, the Rydberg drawings,
15 depict wounds in one place versus another?

16 A No. No. Nobody but me and Rydberg had
17 anything to do with the preparation of those
18 drawings, and nobody gave me any instructions.
19 See, it's really funny--whatever. I just don't
20 even understand the question. I was not operating
21 under anybody's direction at any time, before,
22 during, or after this horrible event.

1 Q Did you meet with any medical consultants
2 on the Warren Commission staff?

3 A On the Warren Commission staff? No. No.
4 I don't even know who they were, if there were.

5 Q Did you meet with any forensics
6 consultants on the Warren Commission staff?

7 A Not that I recall.

8 Q Other than Mr. Specter, do you recall
9 having met with anyone else on the Warren
10 Commission staff other than at the time you
11 testified?

12 A No. I can't swear that I didn't, but I
13 certainly don't remember it.

14 Q During the time that the Warren Commission
15 was in existence, did you meet at all with any FBI
16 agent or FBI personnel?

17 A No.

18 Q Did you meet during the time the Warren
19 Commission was in existence with anyone from the
20 Secret Service, other than during the night of the
21 autopsy?

22 A No.

1 Q Did you meet with anyone who was
2 affiliated with the Edgewood facility?

3 A Edgewood Arsenal?

4 Q Yes. During the time of the Warren
5 Commission.

6 A No, I don't think so.

7 Q Does Mr. Olivier, does that name sound
8 familiar?

9 A I have some vague recollection of the
10 name, but I can't go beyond that.

11 Q Did you ever go to Edgewood Arsenal during
12 the time the Warren--

13 A No, no, no.

14 Q --Commission was in existence?

15 A No, no. No.

16 Q Earlier in the deposition, you made
17 reference to your interview with Dan Rather. Do
18 you recall that?

19 A Yes.

20 Q Can you tell me what the circumstances
21 were that led up to your doing that interview for
22 CBS?

1 A Only in the vaguest kind of terms. CBS
2 apparently announced that they were going to put on
3 a three--I think it was a three-hour or a three-
4 night report on the Kennedy assassination, and they
5 apparently approached the Surgeon General of the
6 Navy to get his permission to speak to me. And he
7 apparently acceded to that. And then either I or
8 the Surgeon General or some combination of us
9 approached the Justice Department, and Eardley then
10 sent that letter.

11 It was a relatively brief affair. He and
12 I met--CBS has a studio downtown, not too far from
13 the White House, actually. I forget exactly where
14 it is now. Pennsylvania Avenue maybe some place.
15 And I got there about 45 minutes before I was to
16 tape this interview. I was very impressed. He
17 just asked me a few questions over a period of
18 maybe 10 or 15 minutes, and then I was very
19 impressed at how he was able to synthesize that
20 into something that seemed to make sense, you know.
21 And that was the end of it right then and there.
22 I've met Dan Rather a couple of time since, but it

1 had nothing to do with the Warren Commission.

2 Q Did you speak personally with anyone in
3 the Justice Department about the interview with
4 CBS?

5 A No. Not that I recall.

6 Q Did you ever meet Mr. Eardley?

7 A Oh, yes. We met him on several occasions.
8 He came down with us when we went to look at the
9 photographs and so forth. So I met with him on
10 several--I can't remember how many times, but not
11 real often. Three or four times, probably.

12 Q What was your understanding of his role at
13 the Justice Department in conjunction with the
14 assassination?

15 A I don't know. He was put forth as a
16 person responsible for some correlative activities
17 of, I thought, the Warren Commission. I really
18 can't--didn't delve into it particularly. He
19 seemed to be the Justice Department person that had
20 some responsibility for the Warren Commission.
21 That responsibility, of course, was divided up
22 among a lot of people, and I don't know that he was

1 supposed to just relate to the medical evidence or-
2 -I can't recall.

3 Q Did you ever receive any suggestions from
4 him, either directly or indirectly, about what you
5 should say in the interview with Dan Rather?

6 A Not at all. Zero. If you ask me now what
7 I said, I couldn't tell you. I never got a tape of
8 it or anything.

9 Q Moving right along, Dr. Humes, did you
10 have any role with respect to the Jim Garrison
11 investigation and prosecution of Clay Shaw?

12 A None.

13 Q Were you ever contacted during the time of
14 the Shaw investigation and trial in regard to
15 possibly offering testimony?

16 A No.

17 Q Did you ever communicate directly or
18 indirectly with any of the following people I'm
19 going to name regarding the autopsy or the
20 assassination? First, Robert McNamara?

21 A No.

22 Q With Robert Kennedy?

1 A No.

2 Q With Jacqueline Kennedy?

3 A No.

4 Q With Admiral Burkley?

5 A Oh, yes. I mean, in the course of the--as
6 we discussed earlier in the deposition today
7 several times.

8 Q Did you discuss anything with him that you
9 now recall in addition to what we have previously
10 discussed?

11 A No.

12 Q Do you remember when the last time was you
13 spoke to him about anything related to the
14 assassination or the autopsy?

15 A Within a week or two after the autopsy.

16 Q That was the last time?

17 A Now, I've seen him socially a couple
18 times. There was no conversation about it at all.
19 I saw him--I forgot when he died. He probably died
20 about eight or ten years ago, and I saw him a year
21 or two before that at a social affair. No
22 discussion about it at all.

1 Q Continuing the list, President Johnson?

2 A I met with President Johnson, but not in
3 any way connected with this. In fact, I'm wearing
4 a pair of cuff links that he gave me today. I was
5 able to report to him that the nodule we took out
6 of his larynx was benign, and he was very happy.

7 Q I can imagine. I would be, too. You
8 don't wish your cuff links to be part of the
9 exhibit--

10 A Oh, I think we ought to just take that out
11 of the report, if you don't mind. I shouldn't have
12 mentioned it, I suppose. But not everybody has a
13 pair of these presidential cuff links.

14 Q Let me try a last question for you, and
15 that is whether you can yourself think of any
16 additional information that would be useful to know
17 about the autopsy that would help provide a better
18 understanding of either what occurred during the
19 autopsy or the wounds that were inflicted on
20 President Kennedy.

21 A I have trouble conjuring up--I wish that
22 the photographs were more graphic and more

1 specifically helpful than they are. I'm
2 disappointed by that, and I didn't find that out
3 with certainty, really, until I got to that House
4 Select Committee hearing. I had difficulty. There
5 was a lot of people around, and they were showing
6 and throwing these up, and I really didn't have the
7 time that I had here even today. And I'm somewhat
8 confused today, as you heard. I was even more
9 confused at that point. But, you know, that's
10 spilled milk. There was nothing I could do about
11 those photographs and X-rays, and I just wish they
12 had been more graphic.

13 But would I have done anything otherwise
14 differently retrospectively? Not particularly, you
15 know. I could have had any number of additional
16 people, friends of mine in special fields like
17 neuropathology and--I didn't need a
18 neuropathologist to see that the man's brain was
19 blown--you know, to me the critical thing was to
20 have somebody that had some experience with
21 ballistics, and that's when Pierre Finck arrived on
22 the scene. We didn't have anybody like that in the

1 Navy that I was aware of, to tell you the truth.
2 We since have had several people very highly
3 trained in forensic pathology, but we didn't at
4 that time.

5 So, no, it was a very long night that
6 didn't get over until about 5 o'clock in the
7 morning, just by everybody's urging that we be
8 expeditious in our efforts. It was not an
9 experience I'd wish to relive, I'll tell you that.

10 Q Are there any additional comments that you
11 would like to make? I told you I'd give you that
12 opportunity.

13 A No. I'm still somewhat vague on the
14 precise bottom line of your all efforts to do these
15 things, and I hope that they're helpful. But if
16 you ask a person enough questions often enough,
17 you're going to confuse themselves sooner or later
18 and not say the same thing twice. Probably minor
19 variations, but--so I'm concerned that we've got so
20 much information put together that we--well,
21 there's an expression in golf. You get paralysis
22 of analysis. You know, you get more information

1 than you can usefully put together. But that's for
2 your--I mean, that's for you to decide, not me. I
3 can't tell.

4 I continue to be dismayed by the large
5 number of these so-called assassination buffs. In
6 fact, they seem to proliferate. I was also very
7 displeased with the Oliver Stone film, which my
8 children urged me to go see because they said,
9 "They got some guy that looks like he's 89 years
10 old playing your role, and you were 39." So I did
11 go to see it, and it just seemed to me to be a
12 disservice to the American people. There were so
13 many vague and cloudy implications that were
14 mentioned during it. I just found it mind-
15 boggling. It just disturbed me.

16 The other people who--they got an Academy
17 Award for film editing, which they deserved because
18 they took contemporaneous film and blended it with
19 their film, and it really made it look like it was
20 contemporaneous. So I think young people who
21 weren't even born or were in their infancy when
22 this event occurred can be just totally confused by

1 it, such things as that. That really has nothing
2 to do with anything. Apparently, that's artistic
3 license. That's what I understand. But I didn't
4 think it was very helpful to anybody.

5 Q Okay. Thank you very much, Dr. Humes. We
6 appreciate it.

7 A Thank you for the opportunity to be here,
8 and I hope I have not appeared to be evasive,
9 because I had no intention of being evasive. But
10 when I came upon questions that I really couldn't
11 specifically remember, I know of nothing else to
12 say but I don't specifically remember.

13 MR. GUNN: Thank you very much.

14 [Whereupon, at 5:10 p.m., the deposition
15 was concluded.]

16 [Signature not waived.]

1 Written Interrogatories to supplement the oral
2 deposition of Dr. James Joseph Humes.

3 In the Autopsy Protocol, the skull entry
4 wound was described as follows:

5 "Situated in the posterior scalp
6 approximately 2.5 cm. laterally to the right and
7 slightly above the external occipital protuberance
8 is a lacerated wound measuring 15 x 6 mm."

9 (Autopsy Protocol, p. 4.)

10 The Forensic Pathology Panel of the House
11 Select Committee on Assassinations reported the
12 following exchange from September 16, 1977:

13 "Dr. Petty: I'm looking at No. 2, X-ray
14 No. 2. Is this the point of entrance that I'm
15 pointing to?

16 Dr. Humes: No.

17 Dr. Petty: This is not?

18 Dr. Humes and Boswell: No.

19 Dr. Petty: Where is the point of
20 entrance? That doesn't show?

21 Dr. Humes: It doesn't show. Below the
22 external occipital protuberance.

1 Dr. Petty: It's below it?

2 Dr. Humes: Right.

3 Dr. Petty: Not above it?

4 Dr. Humes: No. It's to the right and
5 inferior to the external occipital protuberance.

6 [Dr. Humes then shown photo 42 (the "wound
7 of entrance in right posterior occipital region").]

8 Dr. Petty: Then this is the entrance
9 wound? The one down by the margin of the hair in
10 the back?

11 Dr Humes: Yes, sir."

12 (Vol. 7, p. 246 of the House Select
13 Committee on Assassinations Appendices to the
14 Investigation of the Assassination of President
15 John F. Kennedy.)

16 The following was taken from your sworn
17 testimony to the House Select Committee on
18 Assassinations on September 7, 1978, while being
19 shown the Ida Dox drawing (Figure 13):

20 "[I]t is obvious to me as I sit here now
21 with [this] markedly enlarged drawing of the
22 photograph that the upper defect to which you

1 pointed or the upper object is clearly in the
2 location of where we said approximately where it
3 was, above the external occipital protuberance;
4 therefore I believe that is the wound of
5 entry.

6 "[T]he object in the lower portion, which
7 I apparently and I believe now erroneously
8 previously identified before the most recent panel,
9 is far below the external occipital protuberance
10 and would not fit with the original autopsy
11 findings." (Vol. 1, p. 327.)

12 The House Select Committee on
13 Assassinations reported that you changed your
14 opinion on the location of the entry wound.

15 "The panel concludes unanimously that the
16 head entrance wound was located approximately 10 cm
17 above the EOP and slightly to the right of the
18 midline...[W]hile testifying before this committee,
19 Dr. Humes, the chief autopsy pathologist, changed
20 his earlier testimony and supported the panel's
21 conclusion as to the location of the wound." (Vol.
22 7, p. 176.)

1 Mr. Gerald Posner, author of the book
2 "Case Closed," reported in Congressional testimony
3 that:

4 "It was the work of [the HSCA] that had
5 the two autopsy physicians change their mind, that
6 they had been mistaken about the placement of the
7 wound, here [slightly above the hairline], and that
8 it is in fact correctly placed 4 inches higher
9 [near the "cowlick" area]. I have spoken to them
10 about this and they have confirmed their change of
11 testimony that they gave before the House Select
12 Committee on Assassinations."

13 (Posner testimony, Hearing before the
14 Legislation and National Security Subcommittee of
15 the Committee on Government Operations, House of
16 Representatives, dated November 17, 1993, 112-113.)

17 Please answer the following
18 interrogatories under oath. Please feel free to
19 attach additional pages to your answers. Your
20 answers may be handwritten.

21 Interrogatory 1: Did you believe, at the
22 time you wrote and signed the Autopsy Protocol,

1 that the location of the entrance wound in
2 President Kennedy's skull was 2.5 cm to the right
3 and slightly above the external occipital
4 protuberance, as is stated in the Autopsy Protocol?

5 Interrogatory 1 answer:

6 Yes.

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1 Interrogatory 2: During your communica-
2 cations with the House Select Committee on
3 Assassinations, did you ever change your original
4 opinion about the location of the skull entrance
5 wound? If so, what did you conclude about the
6 location of the entry wound?

7 Interrogatory 2 answer:

8 See accompanying letter.

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1 Interrogatory 3: Did you ever change your
2 opinion about the location of the entrance wound in
3 the skull? If so, please explain when you changed
4 your opinion and the circumstances that led you to
5 change your opinion.

6 Interrogatory 3 answer:

7 See accompanying letter.

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1 Interrogatory 4: What is your current
2 belief as to the location of the entry wound in
3 President Kennedy's skull?

4 Interrogatory 4 answer:

5 As stated in the autopsy report.

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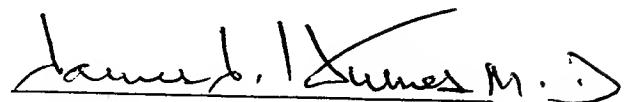
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CERTIFICATE OF DEPONENT

I have read the foregoing 248 pages which contain the correct transcript of the answers made by me to the questions therein recorded.

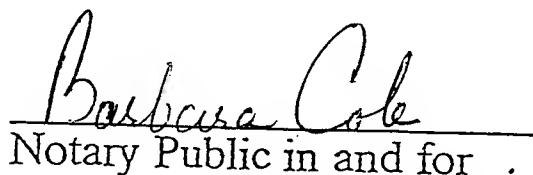


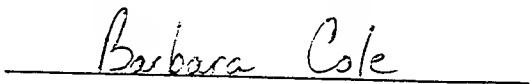
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* * *

Subscribed and sworn before me this

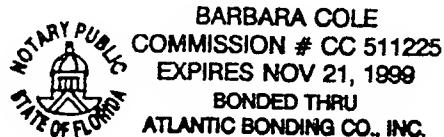
11th day of March, 19 96.



Barbara Cole
Notary Public in and for

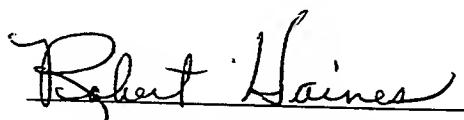
Barbara Cole

My commission expires 11/21/99.



CERTIFICATE OF NOTARY PUBLIC

I, ROBERT HAINES, the officer before whom the foregoing deposition was taken, do hereby testify that the witness whose testimony appears in the foregoing deposition was duly sworn by me; that the testimony of said witness was taken by me stenographically and thereafter reduced to typewriting under my direction; that said deposition is a true record of the testimony given by said witness; that I am neither counsel for, related to, nor employed by any of the parties to the action in which this deposition was taken; and further, that I am not a relative or employee of any attorney or counsel employed by the parties hereto nor financially or otherwise interested in the outcome of the action.



ROBERT HAINES

Notary Public in and for
the State of Maryland

My commission expires: March 18, 1998